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THE

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AN INDEPENDENT MONTHLY JOURNAL,

DEVOTED TO MEDICINE AND SURGERY.

NASHVILLE, TENNESSEE.

FOR TABLE OF CONTENTS, SEE LAST PAGE OF READING MATTER.

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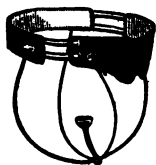
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DEERING J. ROBERTS, M. D., - - Editor and Proprietor.

Vol. 12.

NASHVILLE, MAY, 1890.

No. 5.

Original Communications.

ANNUAL ADDRESS OF DUNCAN EVE, A. M., M. D.,
OF NASHVILLE, TENN., PRESIDENT OF THE
TENNESSEE STATE MEDICAL SOCIETY,
AT ITS ANNUAL MEETING AT
MEMPHIS, TENN., APRIL
8th 1890.

Gentlemen of the Tennessee State Medical Society:

These annual reunions, social and scientific, of the members of a great profession, are both delightful and useful; the renewal of acquaintances; the creation and revival of friendships; the review of the achievements of the past; the evolution of new theories; the generous and anxious discussion of great questions; the comparison of observation, experience and experiments; the contemplation of the wonderful progress made in every department of medicine; the anticipation of future discoveries, inventions and appliances, these all combined make our associations pleasing and productive of happy and beneficial results and consequences.

I know not how I could better occupy the few minutes allowed me on this occasion than by inviting, in a purely suggestive form, your attention to the recent progress in our profession. And yet, in attempting the performance of this duty, I am admonished that there are so many members of the society more familiar than I am with the theory and practice of medicine, that prudence, as well, I trust, as a becoming degree of modesty, requires that I direct your attention to that branch of our profession to which I am exclusively devoted. I therefore beg your indulgence while briefly alluding to the recent progress in surgical science. The courage, the prudence, the wisdom, the patient industry, the zeal, the accurate observation, the critical examination, the continuous contemplation, the superior learning, and the great ability engaged in the advancement and development of this department of our noble science and art have been crowned with the happiest results.

What heretofore would have startled, now becomes commonplace. What once defied the utmost powers of imagination to conceive, now becomes the real occurrence of every day life.

Surgery has taken old and familiar agencies and found in them either a new value, or discovering their worthlessness, used and applied others in their stead. It has invented new instruments and appliances, and found new and better use for those heretofore known. It is continually enlarging its province and ascertaining and defining its boundaries.

Let the following illustrations and examples demonstrate the truths thus enunciated.

LITHOTOMY AND ILLUMINATION OF THE BLADDER.

Suprapubic lithotomy instead of perineal lithotomy has gained much popularity in all countries, and will we think in a short time be adopted by all surgeons as the safest method. In this connection, it is well to allude to the new method of Electric Illumination of the bladder. The general opinion is reflected by Meyer of New York, who says, after an experience of twenty Cystoscopies (amongst which he discovered five tumors, two stones, and once foreign bodies): "There is no doubt in my

opinion, and no surgeon doubts it any more to-day, that cystoscopy has a great future."

BRAIN SURGERY.

Considerable progress has been made in brain surgery, on account of our increased knowledge of cerebral topography. Souchon of New Orleans, makes an excellent suggestion, that in cases in which the diagnosis of cysts or abscess of the brain is doubtful, the brain may be explored by a fine aspirating needle, introduced through a hole in the skull with a watch-maker's drill. Care must be taken to prevent the "bit" of the drill penetrating too far. The hole in the skull should be large enough to admit a needle twice the size of the ordinary hypodermic needle. Bergman, Wernicke, McEwen, Mitzkunner and others have by their writings and operative procedures, made wonderful advances, in the management of the brain traumatism, and the treatment of epilepsy and cerebral tumors.

INGUINAL COLOTOMY.

Even within the last year we are led to believe that inguinal colotomy is to a great extent superceding the lumbar operations, and the various operators performing it maintain that it is because of the ease with which it is done, because a better spur can be obtained in the inguinal region, and because of the patient's more rapid recovery from the operation.

EXTRUSION OF GALL-STONES.

The extrusion of gall-stones by digital manipulation after the method of Harley is one of the many scientific procedures worthy of mention. For ten years or more the profession was conscious of the danger of allowing gall-stones to remain in the gall-bladder or biliary passages long enough to induce ulceration and perforation by pressure, but the consciousness of this danger had been increasing, and though in certain instances this digital manipulation had been resorted to in suitable cases, yet it was not until the beginning of this year that indisputable evidence of its benefit was furnished.

GOITRE.

Upon another subject of interest, Terrier publishes a note in *Le Progres Medical* in which he claims to cure Goitre by ethereal solution of iodoform. The patient was a young man of robust health, age seventeen years; the Goitre consisting of three tumors, of which the most voluminous was situated at the right side of the neck, and of the size of a hen's egg, the smallest the size of a hazel-nut and in front of the trachea, the other in size a medium between these two, and situated on the left side. The tumor very hard, not adherent to the skin, but movable during deglutition. The treatment was begun by the use of the hypodermic syringe, in the injection of a five per cent solution of iodoformed ether, daily. The circumference of the neck had diminished an inch at the expiration of three weeks. The subsequent treatment was one hundred injections extending through eight months, at the end of which time, and when writing, Dr. Terrier declares the goitre nearly cured, there only remaining a small lump about the size of a small nut in the place of the large tumor, the other tumors having entirely disappeared.

RADICAL CURE OF HERNIA.

In the radical cure of hernia, many new and thoroughly good points have been suggested by Bank, MacEwen, McBurney, Bull, Boll and Robson. The last of whom prefers to separate the sac, to ligature it as high as possible, and then to use part of it as a pad to strengthen the weak canal; afterwards suturing the external pillars together with silk or chromicised cat-gut. He has operated on sixty cases by this method, and is well satisfied with the results.

INTESTINAL SURGERY.

Wonderful progress has been made in intestinal surgery. Among the many new operations, I have only time to allude to Abbe's cure of fœcal fistula by intestinal anastomosis, apposition being effected by means of catgut rings in place of Senn's bone-plates.

SURGICAL SHOCK.

Cheever of Boston, makes, we think, some pointed suggestions on the question bearing on modern surgical practice, upon the causation, aggravation or mitigation of shock. In his opinion, with regard to the production of shock, modern methods, while reducing pain and hemorrhage, have increased the tediousness of operations, the nausea, the exposure while operating, and the consequent low temperature. Primary shock is diminished and secondary shock is increased, nausea is one of the attending symptoms of shock, and is the most dangerous factor in producing anæsthesia. He maintains in regard to anæsthetics that they annul pain at the expense of nausea, considers it an axiom that anæsthesia does not annul the existing, but only the additional shock which the pain in cutting produces.

Dr. Cheever also insists that the tendency of modern surgery is to prolong unduly operations, patients being frequently one and a half and two hours on the table, the older methods of quick surgery being abandoned.

The following are the chief rules of treatment suggested for the prevention or alleviation of shock.

Before operation :—

1. Wait for reaction.
2. Give alcohol in some form, a quarter of an hour before anæsthesia.
3. Anæsthesia to be short as possible.
4. Operation to be as rapid as is prudent.
5. Dressing to be as short as possible.
6. The patient never to be chilled.

After operation :—

1. Persistent and carefully applied dry heat.
2. Nutrient enemata.
3. Hypodermic injection of brandy or some other diffusible stimulant.
5. Quiet and rest, with the head low.

REMOVAL OF SPLEEN.

The removal of the spleen for malignant disease is regarded as a justifiable operation in this the 19th century, justifiable because

death is inevitable without it, justifiable because science and skill have so much increased the probability of success.

Out of ninety splenectomies reported by Asch, he claims fifty-one to be successful; while Wright reports sixty-two operations, of which twenty-two recovered.

For reasons so familiar, the results in this direction promise soon to become more brilliant and satisfactory.

NERVE GRAFTING.

When indicated, nerve grafting has become a simple and favorite operation. In a gap made by the removal of a tumor on the median nerve, Robson, from a recently amputated leg "grafted" two and a half inches of the posterior tibial nerve, and in five weeks thereafter, not only was sensation restored, but there was present some motor power.

HIP-JOINT AMPUTATION.

Of all the operations engaging the skill, and invoking the aid and challenging the courage of surgery, perhaps none are more formidable in their results than hip-joint amputations. The severity of the operation, the great loss and difficulty of controlling hemorrhage, the tremendous and often overwhelming shock to the system; all, surround it with dangers and obstacles of which enlightened surgeons could not fail to be anxiously conscious.

Now, the theory is enunciated and its establishment claimed almost by demonstration, that many of the dangers and difficulties insuperable, it would seem from the operation, can be reduced, if not removed, by the method "in two times," as a great surgeon termed the procedure.

Before I had an opportunity of examining the practice, or witnessing its tests; yielding to the condition of a patient, and recognizing the duty which necessity imposed upon me, I had divided the operation with the gratifying result of complete success.

On a recent visit to New York City, I was shown two patients in Dr. Wyeth's infirmary, upon whom he had amputated at the coxo-femoral articulation by the method "in two times,"

by which he demonstrates that mortality is to a great extent diminished. With ample clinical material, with excellent hospital facilities and appointments, with instruments of his own invention, with a learning accurate, extensive and profound, with large and practical experience, Wyeth is giving his time and talent to the development of this great operation. .

I fear that I am trespassing too far upon your time and patience, otherwise it would at least be pleasing to allude to many other new and original procedures, such, for instance, as excision of joints, the treatment of spinal diseases, club foot etc., but suffice it to state, that from present indications a wonderful epoch in surgical progress is upon us.

It does seem that the genius of phrophecy inspired by a consciousness of the great potentialities of the science of surgery, with the voice of enthusiastic prediction, has spoken in the recent past and exclaimed: From the cranium, or throughout the entire osseous system, I will remove, or cut through by section, and lift out any part of bone in the body, and with an adaptation of means, agencies and manipulations so complete, and a restoration so perfect, that the surrounding tissue will forget to complain, and vitality in its renewed condition will confess an unconsciousness of not having been impaired.

Again, it exclaims: I will sieze the electric spark and teach it to explore the exhausted nerve and give new life while it thrills, or with a delicacy and refinement of touch which blade or point of steel, or thread of fibre, or metal in the hands of the surgeon can never equal, I will send it through the structures as an agent of cautery or elimination, with a directness so true, and a precision so just, that even adjacent blood vessels will not be annoyed by its presence. Or, disconnecting its white light from the company of heat, I will send it into the human cavities and illumine, until the eye can gaze upon them as if they were external and basking in the rays of the sun.

As with a vice I will grasp the "human form divine," and soothing it into anæsthetic repose, I will lop limb after limb, until scarcely more than half the original self remains, and yet so retain and preserve its vitality, that even the prospect of longevity will not be threatened.

Lastly it exclaims: From no portion of the human system, where disease can appear, or injury reach, will I be excluded. I will lay open the trunk and remove parts of its viscera. I will sever and reunite the intestines, and wherever tumor or foreign body intrudes, separate it, and will so kindly treat the adjacent healthful parts that their integrity shall not be disturbed.

Every one recognizes the fact that each achievement of our science becomes prophetic of something greater; that every conquest promises others more brilliant; that he is the true disciple who so interprets the lessons of the past as to anticipate the results of the future. Yet standing to-day in the presense of the glories of recently accomplished facts, with the splendor of the light of a noble science shining upon us, the proudest symbols of thought and the boldest flight of the imagination, fail alike to express or conceive the grand and magnificent results immediately awaiting us.

Thus we have a refining, elevating, benevolent and beneficent science that awakes our affections, inspires our energies, and enlists our faculties in its progress, culture and development.

PHENIQUE COMPOUNDS IN GERM DISEASES.*

BY W. F. GLENN, M. D., NASHVILLE, TENN.

By the experiments of Pasteur, Tyndal and others, the fact that many, if not all diseases, are due to the presence and active development of living germs in the system, has been thoroughly established.

The development of germs in the living system is as properly called fermentation, as is a similar process in the wine-vat in the formation of wine; and, as in the wine-vat, when the process of fermentation begins, there is an elevation of temperature, which rises in proportion to the activity of the fermentation. If any agency be employed which directly lessens the fermentation process, just in the same proportion is the temperature lowered, and *vice*

*A paper read at the 57th Annual Meeting of the Tennessee State Medical Society, at Memphis, April, 1890.

versa. So we find in the human being, in all zymotic diseases, when the fermentitial microbe is introduced into the blood, there finding its natural element, its development or multiplication begins, and the immediate elevation of temperature takes place. Just in proportion to the activity of this multiplication of disease cells, their rapidity of development, so is the fever higher, and the symptoms graver.

While we recognize the fact that this analogy is not complete, on account of fermentitial cells in the wine vats having to deal purely with inert or dead matter, and in the animal organism they have to contend with the living cells which possess wonderful catalytic powers within themselves, and are therefore able to resist or counteract in a great measure, the fermentation process; yet the results of numbers of experiments have completely proven the process to be the same.

The greater the resisting powers of the living cells, the milder the disease, on account of a less degree of fermentation. It appears, therefore, perfectly clear that well-nigh all disease is due to fermentation; whether it be a small suppurating wound or yellow fever. In one instance, an increase of unnatural cells in a part—in the other, in the system.

It therefore seems plain, that in order to arrest the progress of any particular disease, it is but necessary to stop the development of these foreign microbes. Having done this, the active cause of all the symptoms has been removed, and a return to health must necessarily be the result.

If then we can introduce into the blood, or apply to a given part, any substance that will destroy the life of these disease germs, we will have reached the perfection of scientific treatment.

From the experiments of Dr. Calvert, it is now known that the salts of quinine in solution will destroy all vegetable fermentation; the salts of mercury in solution, all animal fermentation; and a solution of pure carbolic (phenique) acid, both.

The only question remaining, in the face of these facts, for us to decide, is as follows:—Can we put a sufficient amount of carbolic acid in the blood, to arrest and prevent the growth of disease germs, with safety to our patient? The answer is cer-

tainly in the affirmative. The accidents heretofore attributed to carbolic acid have been due to its impurity, more than to the quantity given. If absolutely pure it is a safe and efficient remedy; if in the least degree impure, it is a very dangerous one.

The essential claim of Dr. Declat, whose preparations of phenique acid I have used both internally and externally, for the last ten years with most gratifying results, is that the toxic symptoms which follow the use of carbolic acid, are due less to the drug itself than to the impurities often present, viz., cresylic and rosacic acids; and the perfectly pure phenique acid can be used internally, or even hypodermatically, in sufficient quantities to obtain its antiseptic effect in the system, without any danger from its use.

While I do not usually advocate any particular make or brand of medicine, yet I have always prescribed Declat's preparations of Phenique, for the reasons that he is careful to have pure material, and chiefly because he has them already prepared for pleasant administration. For example, The Syrup of Ammonia-Phenate, Iodo-Phenique, Sulpho-Phenique, Nascent-Phenique; and for local application Glyco-Phenique.

There are two minor effects of carbolic acid which should claim our attention here: One is a constipating influence; the other, a tendency, in a slight degree to diminish the fluidity of the blood. The first, can be easily overcome by laxatives; the second, by combining with the acid something that will in a degree, counteract the tendency of the acid, as well as the fever, to thicken the blood; so we have in the combination with ammonia (Ammonia-Phenate), a remedy which accomplishes this; and stimulates at the same time.

Thus far we have dealt with this subject almost from a theoretical standpoint. Now let us look at its practical application. For the past ten years I have employed Phenique acid as my chief remedy in all cases of malarial, typhoid and scarlet fevers, diphtheria, erysipelas, blood poisoning; and as a local application to all wounds, whether the result of accident or surgical operation, and have found the result so satisfactory that there is little left to be desired. I present here (which you will pass

around and examine), the photograph of a finger, taken ten days after the injury, which was treated by keeping absorbent cotton saturated with a one to four solution of Glyco-Phenique, closely and constantly applied to it. The patient suffered no pain after the first night, took no anodyne thereafter, and made a splendid recovery. The cause of the accident was getting the finger into a mattress machine, and having it mashed by cog-wheels.

In May 1886, I removed a schirrus breast, in the private department of the Nashville City Hospital, the incision being ten inches in length, extending into the axilla.

The wound was dressed with the one to four Glyco-Phenique solution, with the result of no suppuration, no unpleasant odor, and perfect healing in ten days. These are but two examples of many such cases since we have been following this plan of treatment.

In typhoid fever, for example, we never had a diarrhœa, a hæmorrhage, never a serious tympanitis, never a death. In conclusion, let me say, that I believe with Phenique acid, and antifebrin as an aid, we possess the treatment, *par excellence*, of all zymotic diseases.

Selections.

THE SUBCUTICULAR SUTURE.—This is the name given by Mr. Kendall Franks to a method of suturing wounds, especially small wounds about the neck and face, where it is desirable, for cosmetic effect, to leave as little trace as possible in the form of a scar. The suture is a continuous one, and fine catgut must be used and a fine curved needle. The needle must be passed horizontally, and at the cut edge of the wound, not at a distance from the edge, as in ordinary suturing. The author's description, in the British Medical Journal, is as follows: "I begin at a point about a quarter of an inch from the upper angle of the wound. The needle is passed horizontally underneath the epidermis of the skin into the cutis vera, and emerges again from

the cutis vera at the angle of the wound itself. It is then passed in a similar manner into the cutis vera alone of the opposite side of the wound, beginning at the extreme angle and emerging at a point a quarter of an inch from it. The catgut is drawn through so as to leave just enough at the first point of entrance to enable it to be tied to the portion of the suture which holds the needle. This forms a starting-point. The needle is again inserted horizontally into the true skin, beginning immediately below the first point of entrance, and comes out again a quarter of an inch lower down; it is then passed similarly into the other edge of the wound at a point corresponding exactly to the last point of emergence on the opposite side, being brought out again a quarter of an inch lower down. This method is continued until the lower angle of the wound is reached." Of course, as the suture is tightened the cutaneous edges of the wound will be brought into close and even apposition. An experience of several years with this method, especially in connection with wounds made for the removal of scrofulous glands in the neck, has satisfied the author of its utility. It also has the indorsement of such well-known men as Dr. Clifford Albutt and Mr. Pridgin Teale. It is but another form of buried suture, and certainly must require very delicate manipulation, a very fine needle, and aseptic catgut in order to insure a successful result. It is well conceived, and does away not only with the blemish of a linear scar in a conspicuous place, but also with the equal unsightliness of stitch marks. As the author remarks, this is not a slight consideration for women or for men with whom occupation or fashion interferes with their allowing the hair to grow in the vicinity of such disfigurements.—*New York Medical Journal*.

THE ANATOMICAL CHARACTERS, NOMENCLATURE AND TREATMENT OF THE DIARRHOEAL DISEASES OF INFANCY.—Dr. L. Emmett Holt, read a very excellent paper on the above subject to the N. Y. Academy of Medicine.

Dr. Holt's paper was based on pathological and clinical observations of seventy cases of these diseases occurring in his hospital service, and in nearly all these cases an autopsy had

been made, his observations extending over a period of two years. Dr. Holt dwelt strongly on the necessity of a new nomenclature for the diseases of children. Perhaps the simplest pathological division that could be made would be into diseases which possess lesions and those which do not. For clinical and descriptive purposes, the nomenclature should be reformed, the same name being used by various authors to indicate totally different diseases.

That many of the diarrhœas are the result of germ infection should be recognized, named and grouped together as mycotic diarrhœas.

Other diarrhœas were the result of acute and chronic dyspepsia, others of catarrhal processes, while in still others there were marked pathological changes, such as follicular ulcerations, enterocolitis, enlargement of the solitary glands, or the formation of a croupous membrane.

His autopsies had all been made shortly after death, some as early as two hours, to obviate the port-mortem changes.

The commonest complications he found in these cases was broncho-pneumonia. One point on which he would lay particular stress was in the use of the name dysentery. Dysentery was a misnomer; and but a symptom common to several forms of intestinal ulceration and should not be used to indicate a disease.
—*Times and Register.*

TREATMENT OF GANGLIONS.—Ganglion is the name given to an enlarged bursa which is developed in connection with one of the tendons, being most common on the back of the hand, or on the extensor tendons of the thumb. It forms a little hard swelling on the back of the joint, and often causes a degree of weakness of the hand which seems out of all proportion with the seeming triviality of the affection.

In olden times the treatment of ganglionic swellings was to give it a smart blow with a book or other body. We adopt in a great preference to this coarse and old-fashioned treatment which was not only less certain and more painful but unnecessarily rough and unsurgical, the following, which rarely fails to obtain

an early, if not an immediate cure. Its object is to evacuate the *entire* contents of the cyst, and to bring its opposite surfaces into perfect apposition with each other. It is a small operation; but on the delicacy of its performance its success materially depends. Bending the hand forward in order to tighten the skin over the cyst we would pass vertically into the center of the tumor a broad shouldered lancet. By a lateral movement of the instrument the orifice will be dilated, and the contents will freely escape. Now it is indispensable to the obliteration of the cyst that the whole of its should be evacuated—every drop and every fraction of a drop, to effect which the sac must be compressed and kneaded in every direction. We therefore then apply a well made, thick compress of lint, and strap it down tightly with good plasters, and lastly apply a roller. In forty-eight hours the wound is healed, and the ganglion is seen no more. We are led to allude to this subject, by the fact that during the last six months we have seen a dozen or more of these little bodies—more than we had before seen in as many years.—*Massachusetts Medical Journal*.

TREATMENT OF LONG-STANDING DISLOCATION OF BOTH SHOULDERS.—Sir Joseph Lister reports two cases of dislocation of both shoulders remaining unreduced at the end of eight weeks and seven months respectively. Having ruptured the axillary artery in a case of the same sort, he decided to cut down upon the bone before trying to reduce it. He made an incision from the coracoid process downward and somewhat outward, in the interval between the deltoid and pectoralis major, and divided the tendon of the subscapularis at its insertion, and then with a periosteum elevator separated the soft parts from the head of the bone and the inner part of its neck. Pulleys were then applied, and as this traction showed some fibrous bands that were put on the stretch, these were divided. As the head of the bone would not return to its position it was protruded through the wound, as for resection, and the external rotators cut through at their insertion. Then after the several attempts with pulley traction, the bone was returned to the glenoid cavity. The wound healed

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kindly. A week later the other shoulder was operated on in a like manner, except that the head of the bone was immediately protruded and the rotators divided. In seven weeks after the operation the patient was able to dress himself alone, and from that time continually gained power in the arms.

In the second case the same operation was done on the left arm seven months after the injury. The right arm was not operated on until six months later. In this case, instead of detaching the soft parts from the bone, the head of the bone was removed with a chisel, when the bone went readily into place. After this procedure, the return of function did not seem to be as rapid and complete as where the bone was left intact. Both cases after the operation were able to earn their living by hard manual labor.

As a result of this experience, Lister advises that when the surgeon feels in doubt as to whether it is prudent to make attempts at reduction, or when such attempts do not succeed, he should, in the first place cut down upon the bone by the usual incision from the coracoid process downward and a little outward, and then with a curved periosteum-detacher freely separate the soft parts from the inner side of the upper end of the humerus. If this fails, he may proceed to turn out the head of the bone, detaching the insertions of the rotator muscles. Even if this procedure fail, the removal of the head of the bone is open to us.—*Brit. Med. Jour.*, Jan. 4, 1890.

THE NEW CONTAGIOUS DISEASES LAW.—The following bill, having passed both houses of Congress, was signed by the President on March 28th :

An Act to prevent the introduction of contagious diseases from one state to another and for the punishment of certain offenses.

Be it enacted by the Senate and House of Representatives of the United States of America, in Congress assembled, That whenever it shall be made to appear to the satisfaction of the President that cholera, yellow fever, small-pox, or plague exists in any State or Territory, or in the District of Columbia, and that

there is danger of the spread of such disease into other States, Territories, or the District of Columbia, he is hereby authorized to cause the Secretary of the Treasury to promulgate such rules and regulations as in his judgement may be necessary to prevent the spread of such disease from one State or Territory into another, or from any State or Territory into the District of Columbia, or from the District of Columbia into any State or Territory, and to employ such inspectors and other persons as may be necessary to execute such regulations to prevent the spread of such disease. The said rules and regulations shall be prepared by the Supervising Surgeon-General of the Marine-Hospital Service, under the direction of the Secretary of the Treasury. And any person who shall willfully violate any rule or regulation so made and promulgated shall be deemed guilty of a misdemeanor, and upon conviction shall be punished by a fine of not more than five hundred dollars, or imprisonment for not more than two years, or by both, in the discretion of the court.

SEC. 2. That any officer, or person acting as an officer or agent of the United States at any quarantine station, or other person employed to aid in preventing the spread of such disease, who shall willfully violate any of the quarantine laws of the United States, or any of the rules and regulations made and promulgated by the Secretary of the Treasury as provided for in Sec. 1 of this act, or any lawful order of his superior officer or officers, shall be deemed guilty of a misdemeanor, and upon conviction shall be punished by a fine of not more than three hundred dollars, or imprisonment for not more than one year, or both, in the discretion of the court.

SEC. 3. That when any common carrier or officer, agent, or employee of any common carrier shall willfully violate any of the quarantine laws of the United States, or the rules and regulations made and promulgated as provided for in Sec. 1 of this act, such common carrier, officer, agent or employee, shall be deemed guilty of a misdemeanor, and shall, on conviction, be punished by a fine of not more than five hundred dollars, or imprisonment for not more than two years, or both, in the discretion of the court.

SALOL IN THE GASTRO-INTESTINAL DERANGEMENTS OF CHILDREN.—Salol is an easily administered, safe, drug, in the first stage of acute gastro-enteritis in children, and in more chronic forms of entero-colitis, accompanied by slimy, bad-smelling evacuations. In the acute condition, it is necessary to keep the stomach at rest and administer two or three doses of salol within five or six hours. For the more chronic state of catarrh it is best given in somewhat larger doses before meals. In frequent serous discharges, and in colitis, the salol does not produce the same good results as in the cases mentioned above, and its effect is uncertain, not being so rapid or so sure as an opiate.

In dysenteric disorders it cannot be relied on. It seems, then, that salol acts best in morbid conditions, due to fermentation and decomposition in the stomach and upper bowel, and that it diminishes in power as it passes through the large intestine.—Walter Lester Carr, M. D., in *Arch. of Ped.*

A NEW METHOD OF TREATING FRACTURED PATELLA.—At a recent meeting of the Clinical Society of London, Mr. Mayo Robson showed a patient (a young woman) on whom he had operated by a novel method to secure bony union in a case of fracture of the patella. The skin over and around the joint was cleansed and rendered aseptic and the joint then aspirated. Drawing the skin well over the upper fragment, a long steel pin was passed through the limb from one side to the other, just above the upper border of the patella. The limb being similarly transfixed just below the patella, gentle traction on the pins brought the fragments into apposition. Antiseptic dressing was applied, and left undisturbed for three weeks; when it was removed there was no sign of irritation and the temperature had never been above normal. As the fragments seemed well united the needles were withdrawn, a plaster-of Paris splint applied, and the patient allowed to go home. Mr. Robson observed that the only precaution necessary was to draw up the skin over the upper fragment in order to avoid undue traction upon it when the fragments were approximated. If there was much effusion in the joint it would be desirable to aspirate.—*Med. Rec.*

GENERAL TREATMENT OF SYPHILIS BY EXTERNAL APPLICATIONS.—For many reasons, it is important to be able to substitute some other method of medication in syphilis to the usual ingestion of the mercurial salts by the mouth ; something more simple, and less irritating to the digestive organs ; and this is the reason why, after careful trial had been made of all the newer methods of administration of mercury, that most authors have lately advised the use of mercurial ointment. But here, again, several objections have been made. First of all, it is a dirty method, and it had to be renewed every day, while the last part used had to be washed. This led to patients not caring to attend to their treatment strictly, and for hospital patients to shirk whenever they could. Only at watering places, like Aix La Chapelle, where the bath men rub the ointment into patients before their daily bath, can this treatment be thoroughly carried out. As it is important to treat these patients not only thoroughly, but also in spite of themselves, the hypodermic injection of injection of insoluble mercurial salts has been practiced ; but the pain this method caused, not to speak of the abscesses, or, at least, hardening of the part injected, has caused the almost complete cessation of this treatment. To turn, as it were, the difficulty, Prof. (agrègè) Quinquaud makes use of, in his hospital service, a *calomel plaster*. Calomel, applied to the skin, is transformed, little by little, into corrosive sublimate, by the chloride of sodium in the sweat, so that the patient has a permanent supply of bichloride of mercury by wearing these plasters.

It is prepared as follows : Diachylon plaster, 800 grammes, to calomel, 300 grammes. The mixture is spread out thinly on a cloth, which is cut up into pieces of ten by twenty centimeters for men ; and in pieces of ten by ten centimeters for women's use. This is applied on any part of the body where the skin is thin, and kept on as long as possible. The absorption of the drug by the skin is proved by the examination of the urine, which shows mercury, and also by the fact that the syphilitic manifestations are rapidly improved, and salivation can also be produced. This is easy to prevent by stopping the use of the plaster in time, or by using it in smaller pieces. This new way

of using an external method of treatment that cannot be shirked, and also is no bother to patients, presents considerable advantages that are seen at once, and we shall be able later on to give more exact details of the results of its use at the St. Louis Hospital here.—*Paris Letter in Phila. Med. Times and Register.*

SOFT CHANCER.—I invariably, and the first thing, pack a chancrous sore with salicylic acid. It does better than anything else, and in most cases healing rapidly follows. When the chancre evinces a disposition to enlarge, I wash with liquid hydrastis, and then fill with boracic acid and bismuth, equal parts.

A solution of chloral hydrate often answers admirably as a local application in spreading chancre. But when I find such a one bound to go to the "demnition bow-wows" anyway, I fill it with potassium chlorate reduced to an impalpable powder. The suffering induced is next thing to squeezing the man's testicle, but the good work done by the chlorate in these cases is truly deserving of monumental honor. I have in this way relieved the worst cases that can be imagined.—J. H. DeWolf M. D. in *Medical Age*.

THE INFLUENCE OF HOT BATHS ON THE ELIMINATION OF MERCURY IN THE URINE.—Dr. Borovsky, of Kieff, has carried out a long series of clinical experiments on twenty-eight syphilitic patients, in order to study the influence of heat on the elimination of mercury from the system through the kidneys. He has employed ordinary hot water baths (28°–34° Reaum., of thirty minutes' duration), artificial sulphur baths (30°–34° Reaum., of twenty or thirty minutes' duration), and hot-air baths (60°–80° Reaum., of fifteen to thirty minutes' duration). The principal results of his investigations may be summarized as follows: (a) Both tepid and hot-water baths, as well as sulphur and hot-air ones, invariably increase the elimination of mercury in the urine; (b) the elimination proceeds the more energetically, the higher is the temperature to which the patient is exposed; (c) a mercurialized organism actually can be completely freed from mercury by the means of a systematic employment of heat in one

form or another; (d) in such cases, where the elimination of mercury ceases spontaneously, it can be made to reappear by the use of hot baths; (e) mercurial stomatitis can be cured by heat more quickly than by other means: (f) hot air baths, while inducing an enormous perspiration, promote the elimination of mercury also through the sweat glands; (g) a simultaneous treatment of syphilis by mercury and heat may sometimes effect cure more quickly than a mercurial treatment alone; (h) in patients with diseased vascular systems the use of hot water requires great caution.—Ch. Szadek, *Inaug. Dissert.*, *British Journal of Dermatology.*)

WHY IS A MISCARRIAGE MORE DANGEROUS THAN A NATURAL LABOR AT TERM?—Prof. William Goodell, in a recent clinical lecture (*Practice*, Feb. 20th 1890,) answers this question as follows: Because the very fact of a miscarriage implies some lesion—something abnormal; because, the placenta not being fully formed, the chorion villi are attached to the whole surface of the womb and some portions of the membrane are liable to remain behind and cause either hemorrhage or septicæmia. Then again, the cervix is not effaced, and the small canal is liable to close up on the retained fragments. A criminal abortion is still more dangerous, because gestation is abruptly interfered with before any detachment of the membranes has taken place, and their retention is therefore far more likely to happen than in an honest miscarriage. A stung or decayed apple falls from its bough at the slightest breeze; while to pull off a healthy green one, demands a force which often snaps the bough from which it hangs. This illustrates the difference between a natural miscarriage and a criminal abortion. In the former, the process of detachment is slow and usually complete. In the latter, the detachment is violent, incomplete and traumatic. The result is, retention of the membranes, from which come serious hemorrhages and still more serious septic infections. Should the patient fortunately escape these, she hardly will escape an arrest of involution, and its resulting discomforts.—*The College and Clinical Record.*

TURPENTINE IN POST-PARTUM HÆMORRHAGE.—"For a number of years," writes a correspondent, "I have used spirits of turpentine in post-partum hæmorrhage, and in every case with the best results. When the ordinary means, that is, friction over the uterus, irritation of the uterus by introduction of the fingers, cold hypodermic injection of ergotine, etc., failed, by saturating a piece of lint with the turpentine, and introducing it with my hand into the uterus and holding it against the walls, rapid contraction took place, and all hæmorrhage instantly ceased. In one or two cases, when the patient was almost pulseless it seemed to act as a stimulant. On no occasion did its action fail, nor did it cause the slightest inconvenience, except in one, when the side of the patient's thigh was slightly blistered by some that came in contact with it, but it gave very little annoyance. I consider it to be much quicker and safer in its action than any other remedy; it does not cause any injurious result, and besides it is much more easily applied. In country practice, getting hot water or using injections often entails loss of valuable time.—*Lancet*.

GENERAL MEDICATION IN THE TREATMENT OF SKIN DISEASES.—Dr. A. H. Ohmann-Dumesnil, in the *St. Louis Clinique*, January, 1890, says that general medication is frequently of more importance in the treatment of skin diseases than local measures, and he cites an example of a strumous child of eight years suffering from eczema and tinea tarsi who was cured by the internal administration of cod liver oil. We cannot let this opportunity pass without expressing our gratification at thus seeing a specialist for the skin advocating general treatment. With the exception of parasitic diseases, there are no diseases of the skin in which local treatment is absolutely necessary, while even in many parasitic diseases constitutional treatment is very beneficial.—*Canada Medical Record*.

PROF. PARVIN regards creolin as preferable to any other antiseptic in obstetrics. He employs it in the strength of one teaspoonful to a pint of water.—*Cincinnati Lancet and Clinic*.

Reviews and Book Notices

DISEASES OF WOMEN, AND ABDOMINAL SURGERY, by LAWSON TAIT, F. R. C. S. Edin. and Eng., L. L. D., Vol. 1., 8 vo. cloth; pp. 547. Three plates and 62 illustrations. Price \$3.00, Lea Brothers & Co., Publishers, Philadelphia, Pa., 1889.

Lawson Tait has many admirers in America, and although roundly abused both here and on the other side of the herring pond, by some, for when can a man of so much positivism escape censure, his work will be highly welcomed by all, and appreciated by many. His claims have met with much opposition and unbelief, but time and more extended experience, the use of antiseptics and the broader possibilities of abdominal surgery demand that his statements be received with far more consideration than would have been deemed possible half a score of years ago.

In his preface he pays a very handsome tribute to his American admirers, whom he states have materially aided him in what he has accomplished.

The plan of the work is not as elaborate as some works on similar topics by other writers, he says: "My chief object is to offer the results of my own experience in as condensed a form as possible." It is essentially a report of his own, how he has done it, and what he has accomplished thereby; and as such it can but be admired and highly esteemed, no matter how much one may differ with him in his views.

The relations existing between abdominal surgery and gynecology according to his views, may be readily estimated by his statement that "the old-fashioned mechanical school—the teaching of the speculum, the caustic stick, and the pessary has been practically killed, and an advanced eclecticism now prevails instead."

He considers the diseases of the genital organs in the following order: *mons veneris*; *vulva*; *vagina*, *urethra* and *bladder*; *uterus*; *broad ligaments* and *mesentery*; *fallopian tubes*; *ovaries*; *pelvic bones*; *liver* and *gall bladder*; *kidneys*; *spleen* and *pancreas*; *colon*, *rectum*, *cæcum* and *small intestines*; *breast*. A full and copious index completing the work.

WOOD'S MEDICAL AND SURGICAL MONOGRAPHS, Consisting of Original Treatises and Reproductions in English of Books and Monographs, Selected from the Latest Literature of Foreign Countries, with all illustrations; 8 vo., Leatherette, pp. 292, Vol. VI, No. 1, April, 1890. Published Monthly. Price \$10 per Annum; Single Copies \$1. William Wood & Co., Publishers, 56 and 58 La Fayette Place, New York, N. Y.

The April number of this excellent series contains the following valuable articles:

The Human Foot: Its form and structure, function and clothing, by Thomas S. Ellis.

Modern Cremation: Its history and practice, by Sir. H. Thompson, F. R. C. S.

Aphasia: A contribution to the subject of the dissolution of speech from cerebral disease, by James Ross, M. D., L. L. D.

THE PULSE. By W. H. BROADBENT, M. D., Fellow of the Royal College of Physicians; Senior Physician to, and lecturer on Clinical Medicine in the Medical School of St. Mary's Hospital; Consulting Physician to the London Fever Hospital; Late President of the Clinical, Medical and Harveian Societies. Illustrated with 50 Sphygmographic Tracings. Lea Brothers & Co., Publishers, Philadelphia, 1890.

This is another of the series of clinical manuals. It is needless to refer to the importance of the subject—the indications of the pulse are always carefully watched in the course of every acute disease. For the physician to fail to examine the pulse as well as to look at the tongue is almost to offer an insult to the patient. This work gives a clear and full exposition of the voucher of the pulse in acute diseases and the interpretation to be placed thereupon. It is a most excellent work and will prove of extended use.

SOME OF THE FALLACIES CONCERNING SYPHILIS, by E. L. KEYES, M. D. (Physician's Leisure Library Series) 12 mo. paper, pp. 71. Price, paper 25 cents; cloth 50 cents. Geo. S. Davis, Detroit, Publisher, 1890.

This is a very interesting little work indeed, and coming as it does from the hands of one of the ablest syphilographers of the

day, it will be of material value in disabusing the mind of a series of errors that are perhaps somewhat traditional, and to some extent due to incorrect teachings of the past ages. His views in regard to the Hot Springs of Arkansas are correct and in accordance with established facts.

ESSENTIALS OF FORENSIC MEDICINE, TOXICOLOGY, AND HYGIENE, by C. E. ARMAND SEMPLE, B. A., M. B. Cantab.; L. S. A., M. R. C. P. Lond. 12 mo. cloth, pp. 196. With one hundred and thirty illustrations. (Sander's Question Compendis). W. B. Sanders, 913 Walnut St., Philadelphia, Pa., Publisher.

At the present time, when the field of medical science, by reason of rapid progress, become so vast, a book which contains the essentials of any branch or department of it, in concise yet readable form, must of necessity be of value. This little brochure, as its title indicates, covers a portion of medical science that is to a great extent too much neglected by the student, by reason of the vastness of the entire field and the voluminous amount of matter pertaining to what he deems more important departments. The leading points, the essentials, are here summed up systematically and clearly.

FOOD IN HEALTH AND DISEASE. By I. BURNEY YEO, M. D., F. R. C. P., Professor of Clinical Therapeutics in King's College, London, and Physician to King's College Hospital. Lea Brothers & Co., Publishers, Philadelphia.

This is a most admirable hand-book for the practitioner that will serve as a guide in the proper adaptation of food in health and disease. The question of food is very frequently a puzzling one to the physician, and its important bearing upon the issue of diseased conditions cannot be over estimated. The author is to be congratulated upon his success in having condensed in such small bulk as much important information. The work is divided into two Parts: Part I treats of Food in Health; Part II of Food in Disease. This volume belongs to the well known series of clinical manuals for practitioners and students of medicine.

Editorial.

FIFTY-SEVENTH ANNUAL MEETING OF THE TENNESSEE STATE MEDICAL SOCIETY.

Held at Memphis, Tenn., April 8th and 9th, 1890.

The Tennessee State Medical Socceity met April 8th inst., in the ladies ordinary of the Gayoso Hotel, a reasonably fair number of members being in attendance. Promptly at 10 o'clock, the President of the Society, Dr. Duncan Eve of Nashville rapped his gavel for order, and Dr. Spruille Buford, rector of Calvary Church, was introduced and opened the meeting with prayer.

Dr. Buford's prayer was a brief but eloquent appeal to the Most High for the guidance of the deliberations of the association.

Dr. D. D. Saunders, of Memphis, delivered the address of welcome on the part of the Committee on Arrangements.

Dr. Saunders began by saying the part of welcoming the association had been assigned to an able young local member of the society whose exceeding modesty overwhelmed him, and at the last moment he had been called upon. As for himself, Dr. Saunders said he was like a fish out of water, but it was a pleasant duty, even if it was true that the heart feels most when the lips fail to speak. For him to say that the welcome of Memphis in its bounty, was as overflowing as the waters of the Mississippi. He said that Memphis was a wonderful city risen from the ashes of misfortune. She was on a river forty-two miles wide, to-day, and it was typical of the cordiality he extended in behalf of the merchants, and all the brave men and fair women of the city. The visitors were most welcomed by their brethren in Memphis, of whom he could say they were ever true to the interest of their profession—men as brave as God ever made—who were actuated in this welcome by the spirit of kindness, affection and professional amity.

After Dr. Saunders' address the Committee on Credentials was called upon for a report, and a recess of several minutes was taken to

enable the committee to examine and report the members entitled to seats in the convention. Several of the members of the committee were absent, and the vacant places were filled by the chairman by the appointment of Drs. Happel, Gardner, Witherspoon and Crumley.

The reports of the secretaries, Dr. D. E. Nelson of Chattanooga, and Dr. Richard Cheatham of Nashville, showed the financial condition of the society to be better than ever before known. Dr. Cheatham's report was handled by Dr. J. P. C. Walker of Dyersburg, who was appointed until the election of officers, which it is understood, would take place next day.

An auditing committee, consisting of Drs. Keyes, Sheddan and Glenn, examined the reports, and approved them.

The following members came forward and registered:

D. E. Nelson, Cooper Holtzclaw, Fred B. Stapp, Chattanooga; T. J. Happel, Trenton; G. W. Drake, Chattanooga; E. Miles Willett, Memphis; J. S. Cain, Nashville; W. K. Sheddan, Williamsport; J. B. Murfree, Murfreesboro; J. W. Penn, Humboldt; J. A. Witherspoon, Columbia; W. L. Nichol, Duncan Eve, Richard Douglas, Nashville; B. P. Keyes, Chattanooga; A. G. Sinclair, Memphis; C. W. Beaumont, Clarksville, J. L. Jones, Bells; J. W. Brandon, Stribling; G. C. Savage, Nashville; W. G. Ewing, Nashville; P. C. McKinnie, Hickory Valley; J. A. Hinton, Friendship; G. D. Hayes, Nashville; C. Briggs, Nashville; H. M. Bostwick, Memphis; C. H. Lovelace, Dukedom; N. T. Dulaney, Bristol; T. W. Roane, Covington; G. B. Thornton, Memphis; Samuel J. Morris, Memphis; W. Frank Glenn, Nashville; J. P. C. Walker, Dyersburg; T. L. Lanier, Parham; S. W. Sanford, Henning; W. E. Wilson, Pulaski; H. W. Tate, Bolivar; T. E. Prewitt, Grand Junction; M. M. Smith, Cedar Chapel; W. B. Moore, Nutbush; E. A. Tarwater, Mason; Richard J. Trippe, Chattanooga; H. Crumley, Chattanooga; J. E. Black, Memphis; H. K. Richardson, Fowlkes; Paul T. Jones, Somerville; W. H. Armstrong, Stoney Point; J. I. Bradley, Sugar Tree; John Gartner, Cottonwood; F. L. Sim, Memphis; J. A. Greene, Dyersburg.

Incontinence of Urine in Children was the title of a paper by Dr. A. J. Swaney of Gallatin, he not being present, it was submitted by title.

This was followed by "A Resume of Surgical Cases in a Conuntry Physician's Practice," by Dr. T. J. Happel of Trenton. This paper

was graphic and interesting. It treated chiefly of the uses of anæsthetics and antiseptics. Following it there was a discussion very generally participated in, which was pending when the society adjourned shortly after 1 o'clock to 3 P. M.

THE AFTERNOON SESSION.

At the afternoon session the discussion of Dr. Happel's paper was resumed, and when the paper was ready to be referred to the Committee on Publications it was apparent, in spite of eminent authorities and instances to the contrary, that the weight of evidence was in favor of chloroform as an anæsthetic.

The next paper was something out of the ordinary of medical discussion, a pleasing metaphysical disquisition entitled "The Triune Man," by Dr. G. W. Drake of Chattanooga, an elaboration on mind, matter and force in human organism. The paper was not discussed, though it was on motion of Dr. Douglass received with the thanks of the society and referred to the Committee on Publication.

Dr. N. T. Dulaney of Bristol then read a profound paper, which was highly praised, "Hypermetropia."

"Endocarditis and its Differential Diagnosis," by Dr. J. A. Witherspoon of Columbia, was an entertaining and instructive paper on diseases of the heart, particularly as resulting in patients with rheumatic tendencies. The subject elicited a wide scope of discussion and was apparently regarded as one of great importance.

Dr. P. H. McKinnie of Hickory Valley had a long paper on "Pneumonitis and its Treatment," which was heartily applauded at the end.

All the papers read were attentively listened to and the discussions were all ably conducted. It was after 5 o'clock when the society adjourned until 8 o'clock P. M.

NIGHT SESSION.

The first business of notable interest in the evening, was the reading by the Secretary of a letter from Dr. T. K. Powell, of Dancyville, to the members of the society. The Doctor is a veteran member of the association, wrote his regrets from a sick bed, and expressed great interest in the welfare of the society.

On motion of Dr. Happel, the thanks of the society were returned to the venerable Doctor for his kindly interest.

The next order of business was the annual address of President Duncan Eve.

PRESIDENT EVE'S ADDRESS.

The address of President Eve was a most pleasing and scholarly one, thoroughly appreciated and cordially applauded. We are gratified to place it before our readers in full, in the first part of this number of the SOUTHERN PRACTITIONER, assuring our readers that it will well repay careful perusal.

At the close of Dr. Eve's address the secretary reported, and several members called attention to the meeting in Nashville, on the 20th of May, of the American Medical Association.

After some discussion, a resolution was adopted, under which, Dr. J. B. Murfree was appointed Chairman of a Committee to act in co-operation with the physicians of Nashville, on the part of the State Medical Society in making the necessary arrangements to secure a successful and satisfactory meeting.

This matter having been settled, Dr. B. P. Key of Chattanooga read a "Report of Eight Ovariectomies in the Last Year." This paper, on a subject of absorbing interest to the whole range of the profession, proved exceptionally interesting, especially as it alluded to a group of unusually successful results in a line of treatment where there is a wide divergence of opinion as to the best methods. It brought up the sorely mooted question of what to do in the different phases of peritonitis, notably in females. The longest, most spirited discussion of the day's session ensued on this subject. There were distinctly marked divisions in making the issue. Some of the physicians claimed that the tendency of most doctors was too much imitation of specialists in using the knife; that they were going too far in their zeal for reputation. The other side, who plainly got the best of the discussion, claimed a misapprehension of the immediate issue, which was the treatment of septic peritonitis; the authority and the practice of all progressive surgery was in such cases in favor of the operation of laparotomy. The question was not brought to a vote, but was referred to the committee on publication.

On motion of Dr. T. J. Happel, 3 P. M., next day was appointed to hold the election for officers. The society then adjourned until 9 A. M. Wednesday.

SECOND DAY'S SESSION—WEDNESDAY, APRIL 9, 1890.

The second day's session of the State Medical Society was called to order at 9 o'clock A. M. With very little delay, the reading of papers

was proceeded with. The first of these was on "Blindness" by Dr. F. T. Smith of Chattanooga, followed by another on "Ophthalmia in Infants," by Dr. T. J. Minor of Memphis.

Though these papers treated principally of affected eyes in very young children whose misfortunes were incidents of their birth, it ranged rather widely both in the papers and the discussions which followed, over a considerable scope of eye disease and its treatment. The debate was rather discursive and indecisive, though somewhat favorable to Dr. Smith's application of nitrate of silver to the inflamed eye of the infant.

This was followed by Dr. Frank Glenn's paper on "Treatment of Diseases and Injury with Phenique Preparations." The paper was heartily applauded.

The following additional members registered during the day:

Peter B. Ford, Memphis; A. B. Brown, Waverly; M. W. Chaffin, White; Geo. H. Price and E. P. Sale, Memphis; D. D. Saunders, G. B. Gillespie, Covington; Frank Trestor Smith, Chattanooga; J. A. Jackson, Gadsden; Y. W. Perkins, Henderson; S. B. Walker, Durhamville; Deering J. Roberts, Nashville; J. D. Sasser, Middleton; S. B. Corey, Union City; J. D. Herron, Jackson; E. K. Leake, Collierville; W. F. Rochelle, Jackson; E. K. Williams, Gates, Tenn.; J. R. Rathmell, W. T. Hope, Chattanooga; Charles M. Drake, Knoxville; J. D. Cole, Newbern; H. H. Young, Ripley; Shep. A. Rogers, John F. Cochran, Memphis; W. T. Briggs, Nashville; C. M. Cebastian, Martin; H. C. Rogers, Madison; B. F. Henning, Memphis; J. D. Shannon, Greenfield; H. S. Williford, Smith Buford, T. L. Bunyan, Memphis.

Next came the report of the State Board of Medical Examiners, by the secretary, Dr. T. J. Happel of Trenton. This report presented some very interesting facts and suggestions, which elicited warm and spirited discussions, which ended in indorsement of the action of the board, as represented by Dr. Happel. The report urged the importance of legislation by the State to further the effectiveness of medical practice in the State, and the discussion resolved itself into a position which needed State aid, not for physicians as a class, but for the benefit of the whole Commonwealth.

The report is full of the most interesting instructive statistics. It shows the number of physicians registered by County Court clerks in each county, giving in order the number of physicians registered, the

graduates, homœopaths and eclectics. Of the leading counties of Tennessee the following are cited from the report, which embraces the entire State :

COUNTY.	Registered.	Graduates.	Non-Graduates.	Regular.	Homœopaths.	Eclectics.
Bedford	54	41	28	38	0	3
Davidson	187	159	13	149	5	5
Hamilton	113	85	28	78	4	3
Knox	87	48	39	41	5	2
Gibson	71	48	23	44	0	4
Madison	54	31	23	30	0	1
Montgomery	41	35	6	35	0	0
Maury	57	41	16	0	0	0
Shelby	184	128	121	2	5	0

The total for the State showed 3,175 registered to practice medicine, of whom 1,680 are graduates, 1,495 non-graduates, 1,607 are regulars or allopaths, 18 homœopaths and 55 eclectics. It appears also from the report, which is as long as it is absorbingly interesting to the profession, that two meetings of the State Board have been held heretofore, both in Nashville, one June 18, 1889, the second February 18, 1890. At the first meeting the board organized by electing Dr. J. B. Murfree of Murfreesboro, president, Thomas H. Hicks of Knoxville, vice-president and T. J. Happel of Trenton, secretary. Only five appointments had been made up to that time in accordance with the provisions of the law. The sixth member of the board, Dr. Heber Jones, was appointed in July by the Governor. On the 18th of February, 1890, the second meeting of the board was held, at which there appeared eleven applicants for examination. Of this number eight were granted certificates. At the last meeting in Memphis, not mentioned in the report, there were eight applicants, four received certificates, three temporary licenses and one summarily rejected.

The most important part of the report as far as the future of the effective work of the board and the profession is concerned is involved in the changes earnestly sought to be made in the "Act to regulate the practice of medicine." These changes have long been worked for by the profession.

The first amendment urged by the board is to change the act so as to read "regular" wherever allopath or allopathic occurs.

Selected Recipes for Physicians Prescribing.

PIL: CHALYBEATE COMP.

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Nux Vomica is added as an ingredient to Pill Chalybeate to increase the tonic effect when desired.

COMPOSITION OF EACH PILL.

(Chalybeate Mass.) Carb. Protoxide of Iron, gr. 2½.
Ext. Nuc. Vom., gr. ¼.

DOSE—1 to 3 Pills.

Employed in the treatment of Anæmia, Chlorosis, Plithisis, Scrofula, Loss of Appetite, etc.

PIL: ANTISEPTIC.

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Each Pill contains

Sulphite Soda, 1 gr.

Salicylic Acid, 1 gr.

Ext. Nuc. Vomica, ¼ gr.

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Pil. Antiseptic are prescribed in cases of Dyspepsia attended with acid stomach and enfeebled digestion, following excessive indulgence in eating or drinking. It is also indicated in Rheumatism.

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Each Pill contains

Sulphite Soda, 1 gr.

Salicylic Acid, 1 gr.

Ext. Nuc. Vomica, ¼ gr.

Powd. Capsicum, 1-10 gr.

Conc't Pepsin, 1 gr.

DOSE—1 to 3 Pills.

Pil. Antiseptic Comp. are prescribed in cases of Dyspepsia, Indigestion and mal-assimilation of food.

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IRON AS A TONIC.

Pil. Chalybeate and Chalybeate Comp.

Iron, (says *Le Progress Medicale*) is one of the most important principles of the organism, and the only metal the presence of which is indispensable to the maintenance of life. It exists in all parts of the system, but nowhere does it acquire such importance as in the blood. The blood of a person in good condition contains about 45 grs. of iron, when this amount is diminished a decline takes place—the appetite fails, the strength is enfeebled, and the blood loses its fine natural color and quality. In a great number of diseases, such as Anæmia, Chlorosis, Hemorrhages, Debility, etc., it sometimes happens that the blood has lost half its iron, and to cure these diseases, it is absolutely necessary to restore to the blood the iron which it lacks. The problem has been to find a preparation of iron in the proper form for penetrating the organism without unduly taking the digestive tract or interfering with the essential qualities of the gastric juice. A preparation containing iron in such a state is scientifically prepared by Wm. R. Warner & Co. under the name of Pil. Chalybeate. It is prepared in such a way that Carbonate of Potash and Sulphate of Iron are compounded so that they do not combine until they are taken into the stomach: there the reaction takes place, and the Proto-Carbonate of Iron (Ferrous Carbonate) is formed without any excess of air, thus forming a salt which is quickly assimilated and the therapy of the preparation is soon shown by its effects. It will be seen in taking these Pills that neither constipation nor other ill effects will result from their use. It has been proven in clinical practice that in cases of Chloro-anæmia the Pil. Chalybeate as prepared by Wm. R. Warner & Co. will regenerate the red globules of the blood with a rapidity not before observed under the use of any other ferruginous preparation, it adding to their physiological power and making them richer in coloring matter. Moreover, being neither styptic nor caustic (as just enough carbonate of potash and sulphate of iron are used to neutralize each other and form nothing but Carbonate of Iron and a small quantity of Sulphate of Potash) and having no coagulating nor astringent action on the gastro-intestinal mucous membrane, the Pil. Chalybeate of Wm. R. Warner & Co. can cause no deleterious effects to the patient, at the same time the therapeutic effects are rapid and energetic and do not give rise to the sensation of weight in the stomach or the gastric pain and indigestion occasioned by other preparations of iron. When a more tonic effect is desired the same combination as Pil. Chalybeate can be obtained with 1-8 of a grain Ext. Nuc. Vomica added under the name of Pil. Chalybeate Comp. (Warner & Co.) thereby increasing the tonic effect and giving renewed strength to the patient.

—*Medical Brief.*

The next provision is that after January 1, 1892, no certificate shall be issued to any one without examination by the board.

Section 12 is asked to be amended so as to change to the fee for certificates from \$1 to \$5.

Sections 13 and 14, the board says, should be amended so as to make any violation of either or both a misdemeanor, punishable by fine for the first offense, and by fine or imprisonment or both for subsequent offenses, the imprisonment to be in the discretion of the court, and to be confined in the county jail not less than one nor more than ten months. This would, if the amendments are adopted, eliminate matter of "action of debt" from the existing act, and enable the board to force a compliance with its provisions. Another amendment proposed authorizes the board to revoke any licenses for grossly immoral and unprofessional conduct.

The final amendment is: "Be it further enacted, that inquisitorial powers are hereby given the grand jurors, and it is made their duty to inquire into all violations of this act and to make presentment of the same."

After the discussion of the report of the Board of Examiners, it was generally urged and so ordered upon motion, that a committee of three be appointed to urge the desired legislation, and that this committee be appointed by Dr. J. B. Murfree, president of the Board of Examiners, that the committee be permanent for persistent work until the long neglected needs of the society and the profession be recognized.

This having been disposed of Dr. J. S. Cain of Nashville, read a paper on "The Use and Abuse of Anti-Pyretics." The reading was followed by loud and prolonged applause. There was very considerable discussion on the subject, which drifted mainly about the treatment of typhoid fever. The result of the consensus of opinions expressed was in favor of antipyrine as against any other remedy for the safe reduction of temperature.

The society adjourned at 1:30 to 2:30 o'clock, half an hour before the hour appointed for the election of officers, leaving the subject open.

AFTERNOON SESSION.

The discussion of anti-pyretics was resumed and continued at the afternoon session until 3 o'clock President Eve rapped for attention, and announced the election of officers in order.

By this time the hall was crowded. After some delay, caused by members registering and paying dues in order to vote, everything was announced ready for nominations for president for the ensuing year.

Drs. G. A. Baxter and G. W. Drake of Chattanooga were placed in nomination, both nominations being made and seconded with brief eulogistic speeches. The result was Dr. Baxter received 50 votes to 40 for Dr. Drake.

The next in order was the election of three vice-presidents, one for East, one for Middle and one for West Tennessee. All these contests were close. The West Tennessee honor was awarded to S. W. Sanford of Shelby County. The Middle Tennessee prize went to Dr. Wm. G. Ewing of Nashville. That for East Tennessee was given to Dr. N. T. Dulaney of Bristol. Dr. D. E. Nelson the present incumbent, was re-elected secretary, and Dr. J. P. C. Walker of Dyersburg was elected treasurer, succeeding Dr. Richard Cheatham of Nashville.

After the elections, which occupied considerable time, Dr. J. W. Cole offered a resolution, which was adopted after considerable discussion, urging a change of the by-laws of the society, so as to provide that in any violation of the code of ethics by a member, he should be subject to a critical examination by the judicial council, which is composed of ex-presidents of the society.

The society then adjourned until 8 o'clock.

NIGHT SESSION—SECOND DAY.

At the evening session there was a considerably diminished attendance, many of the visiting members having left for their homes.

The presentation of the remaining papers was called for and responded to, and the following subjects were treated and discussed:

"An Obscure Case of Intestinal Obstruction Following Reducible Hernia—Laperotomy, by Dr. W. F. Rochelle of Jackson.

In addition to the stated papers there were two others, both voluntary, which were discussed and indorsed as meritorious; one by Dr. A. G. Sinclair of Memphis on "Suppurative Ear Inflammation" and the other by Dr. W. E. Wilson of Pulaski on "Hysterectomy." The latter presented a case of surgical operation which is very rare, and though it was the last subjected, elicited most favorable comment.

After the discussion, which consumed much of the evening, the hour for adjournment was evidently at hand. Then came the usual resolutions of thanks to the profession, and people, and railroads, for

hospitality, also to the retiring president, Dr. Duncan Eve, for brilliant services.

The society then adjourned to meet next April in Nashville, as provided by the by-laws, that every alternate meeting shall be at the capital of the State.

AMERICAN MEDICAL ASSOCIATION—FORTY-FIRST ANNUAL MEETING.

We again desire to call attention of our readers to the coming meeting of the American Medical Association, which will commence in this city, Tuesday, May 20th inst., and earnestly hope that every reader of this journal, who possibly can get away for a brief respite from his arduous labors, will make use of the opportunity and take part in the meeting.

You can either attend as a delegate from any State, county or local society that has subscribed to the code of ethics of the association; or as a member by application, provided you have a certificate signed by the *President* and *Secretary* of any State, county or local society in affiliation with the association, setting forth the fact that you are a member of said society; or as a permanent member provided you have previously attended a meeting of the association as a delegate and have retained membership by paying the annual dues. Delegates, permanent members and members by application are entitled to all the courtesies of the meeting, and in addition will receive the *Journal of the American Medical Association* for one year on payment of the annual dues, which is fixed at the uniform rate of five dollars. The *Journal of the Association* is well worth many times the amount. It is published weekly, and contains the proceedings of the meeting, all the papers and addresses read at the meeting, and in addition a large amount of miscellaneous reading matter devoted to medicine and surgery and the collateral branches, consisting of Editorials, Book Notices and Reviews, Original Communications, and Selected Items from contemporaneous medical publications, constituting it one of the best weekly medical publications in America.

We again reproduce the following regulations in regard to reduced rates; read them carefully and comply with them, and then you will have no trouble in getting the reduction in fare.

1. Each person must purchase a first-class ticket (either unlimited or limited) through to the place of meeting, for which he will pay the

regular tariff fare, and upon request the regular ticket agent will issue to him a certificate of such purpose (Form 2).

2. If through tickets cannot be procured at the starting point the person will purchase to the most convenient point where such through ticket can be obtained, and there repurchase through to the place of meeting, requesting a certificate properly filled out by the agent at the point where the repurchase is made.

3. The reduced rate for the return journey will only apply to points to which through tickets are on sale at the place of meeting, and at which through tickets to the place of meeting were purchased. If through tickets to the starting point cannot be procured at the place of meeting, the person will purchase to the most convenient point to which such through ticket can be obtained.

4. Tickets for the return journey will be sold by the ticket agents at the place of meeting, at one third the highest limited fare, only to those holding certificates (Form 2), signed by the ticket agent at the point where the through ticket to the place of meeting was purchased, and countersigned by the Secretary or clerk of the convention, certifying that the holder has been in attendance upon the convention.

5. It is absolutely necessary that a certificate be procured, as it indicates that the full fare has been paid for the going journey, and that the person is therefore entitled to the excursion fare returning. It will also determine the route via which the ticket for return journey should be sold, and without it no reduction will be made.

6. Tickets for return journey will be available for continuous passage only; no stop over privileges being allowed on tickets sold at less than full fare. Certificates will not be honored unless presented within three days after the date of adjournment of the convention.

7. Ticket agents will be instructed that excursion fares will not be available unless the holders of certificates are properly identified, as above described, by the Secretary or clerk, on the certificate, which identification includes the statement that one hundred or more persons, who have purchased full fare tickets for the going passage, and hold properly receipted certificates, have been in attendance at the meeting.

The certificates are not transferable, and the signature affixed at the starting point, compared with the signature to the receipt, will enable the ticket agent to detect any attempted transfer.

The general meetings of the Association will be held in the forenoon of each day beginning Tuesday at 11 A. M. at the Vendome Theatre, on

Church street, between High and Vine, and convenient to all the principal hotels.

The Sections, which will meet in the afternoons will be as follows :

Practice of Medicine, at Vendome Theatre.

Surgery and Anatomy, at Watkins Hall, two doors east of Theatre Vendome, on same side of Church Street.

Obstetrics and Diseases of Women and Children, at Y. M. C. A. Auditorium, on same side of Church Street as Theatre Vendome, and two and a half squares east.

State Medicine, in S. S. Room of Christian Church, Vine Street, a few doors south of corner of Church Street, west of Vendome Theatre.

Laryngology and Otology, upper S. S. Room of First Baptist Church, corner of Vine and Broad Streets.

Ophthalmology, in lower S. S. Room of First Baptist Church, corner Vine and Broad Streets.

Diseases of Children, in Boys' Room of Y. M. C. A. Building, Church Street, two and a half squares east of Vendome.

Medical Jurisprudence, in First Presbyterian Church S. S. Room, one and a half squares east of Vendome, corner of Church and Summer Streets.

Dermatology and Syphilography, in Lecture Room of Medical Department University of Tennessee, Broad Street, between Vine and High Streets.

Oral and Dental Surgery, in S. S. Room of McKendree Church, one square east of Vendome, on same side of Church Street.

The Medical Editor's Association will meet Monday night, May 19th, in Lecture Room of Vanderbilt Dental Department, on Cherry Street, between Church and Cedar Streets. The Committee on Dietetics will hold its meetings in the same place on the afternoons of the three succeeding days.

The Exhibition Rooms of Medical and Surgical appliances will be held at Amusement Hall, on Broad Street, near Spruce. All places are accessible by electric street cars from any part of the city.

Again we earnestly urge all our readers to come either as a delegate, member by application, permanent member, or even as a visitor. Nashville always looks well in the month of May. We may very confidently expect agreeable weather, and our air at that time is at its

balmiest. As for social entertainments we will say nothing, we will leave that to be done by our visitors after the meeting closes. We can safely assure all, a most hearty welcome and a cordial greeting. Then by all means come, bring your wives, your children or your sweethearts with you. We have a live and progressive city, amply equipped to take care of you and provide for you.

MEDICAL AND SURGICAL RECORDS OF THE ARMY OF THE CONFEDERATE STATES.

We take great pleasure in placing before our readers the following circular letter from one who will long be remembered as an earnest, ardent and devoted member of the medical corps of the late Confederate States Army. The object he is now engaged in is not only of material interest to those who yet survive, but will also be appreciated by their children, and their children's children—it is an effort to place upon the ineffaceable page of history correct statements of the facts of one of the most momentous epochs in our great country's existence.

OFFICE OF THE SURGEON GENERAL OF THE UNITED }
 CONFEDERATE VETERANS, 156 Washington Ave- }
 nue, New Orleans, La., April 9th, 1889.

To the Surgeons of The Medical Corps of The Confederate States Army.

Comrades:

The surrender of the Army of Northern Virginia on this day twenty-five years ago, practically ended the struggle for the independence of the Southern States, and during this quarter of a century death has thinned our ranks and our corps can now oppose but a broken line in the great struggle against human suffering, disease and death. S. P. Moore, Surgeon General of the Confederate Army is dead. Surgeons L. Guild, A. J. Foard, J. H. Berrien, J. T. Darby, W. A. Carrington, F. A. Ramsey, Samuel Choppin, R. J. Breckinridge, E. N. Coney, E. T. Galliard, A. N. Talley, Paul F. Eve, O. F. Manson, Louis D. Ford, Habersham, James Bolton and a host of other medical officers of the Confederate States Army, all are dead.

The association of the United Confederate Veterans was formed in New Orleans in 1889, the objects of which are historic, social and benevolent. Our illustrious Commanding General, John B. Gordon, Governor of Georgia, has ordered the United Confederate Veterans to assemble in Chattanooga, Tennessee, on July 2nd, 1890. It is ear-

nestly hoped that every surviving member of the medical corps of the Confederate Army will meet with the United Confederate Veterans upon this important occasion, and promote by his presence and his councils the sacred interests of the Association of the United Confederate Veterans.

It is of the greatest importance to the future historians, and also to the honor and welfare of the medical profession in the South, that careful records should be furnished the Surgeon General of the United Confederate Veterans, embracing the following data :

1. Name, age, nativity, date of commission in the Confederate States Army, nature and length of service of each and every member of the medical corps of the Confederate States Army.
2. Obituary notices and records of all deceased members of the medical corps of the Confederate Army.
3. The titles and copies of all field and hospital reports of the medical corps of the Confederate Army.
4. Titles and copies of all published and unpublished reports relating to military surgery and diseases of armies, camps, hospitals and prisons.

The object proposed to be accomplished by the Surgeon General of the United Confederate Veterans, is the collection, classification, preservation and final publication of all the documents and facts bearing upon the history and labor of the medical corps of the Confederate States Army, during the Civil War 1861-1865. Everything which relates to this critical period of our National History which shall illustrate the self-sacrificing and scientific labors of the medical corps of the Confederate States Army, and which shall vindicate the truth of history, should be industriously collated, filed and finally published. It is believed that invaluable documents are scattered over the whole land in the hands of the survivors of the Civil War of 1861-1865, which will form material for correct delineation of the Medical History of the corps which played so important a part in the great historic drama.

Death is daily thinning our ranks, whilst time is laying its heavy hands upon the heads of those whose hair is already whitening with the advance of years and the burden of care. No delay, fellow comrades, should be suffered in the collection and preservation of these precious documents. The task of collection of all documents, cases, facts relating to the Medical History of the Confederate Army, invites

the immediate attention and co-operation of his honored comrades and beloved compatriots throughout the South.

Respectfully,

Your obedient servant.

JOSEPH JONES, M. D.

Surgeon General United Confederate Veterans

TENTH INTERNATIONAL MEDICAL CONGRESS.

The Committee of Organization of the Tenth International Medical Congress, to be held in Berlin, August 4th to 6th, R. Virchow, *President*; E. von Bergmann, E. Leyden, W. Waldeyer, *Vice-Presidents*; O. Lassar, *Secretary General*, have appointed the undersigned members of an American Committee for the purpose of enlisting the sympathy and co-operation of the American profession.

We are assured that the medical men of our country will receive a hearty welcome in Berlin. The Congress promises to prove of inestimable value in its educational results, and in securing the ties of international professional brotherhood. It is most important that the American profession should participate both in its labors and its fruits.

Delegates of American medical societies and institutions, and individual members of the profession, will be admitted on equal terms, the undersigned, therefore, beg to express their hope that a large number of the distinguished men of our country will appreciate both the honor conferred by this cordial invitation and the opportunity afforded us to fitly represent American medicine.

The Congress will be held at Berlin, from the fourth to the ninth of August.

The arrangements in regard to a new general meeting and the scientific work, which is delegated to the sections, are the same as in former sessions. A medico-scientific exhibition, the programme of which has been published a few weeks ago, is to form an ingredient part. It is to the latter that the Berlin committee is very anxious that both the scientific and the secular press should be requested to give the greatest possible publicity.

The office of the Secretary General is Karlstrasse 19, N. W. Berlin, Germany.

S. C. BUSEY, Washington, D. C. WILLIAM T. LUSK, New York.

WM. H. DRAPER, New York. WILLIAM OSLER, Baltimore, Md.

Derangements of the Liver.

Horsford's Acid Phosphate

has been used with good effect in diseases of the liver, and biliary disorders, where an acid treatment is indicated, and has especially proved a desirable medium to employ in chronic hepatic affections. By its action it stimulates the liver and promotes an increased flow of bile.

The Acid Phosphate is far superior to the nitro-muriatic acid of the pharmacopœia, in that it serves to assist digestion, and promotes in a marked degree the healthful action of the digestive organs.

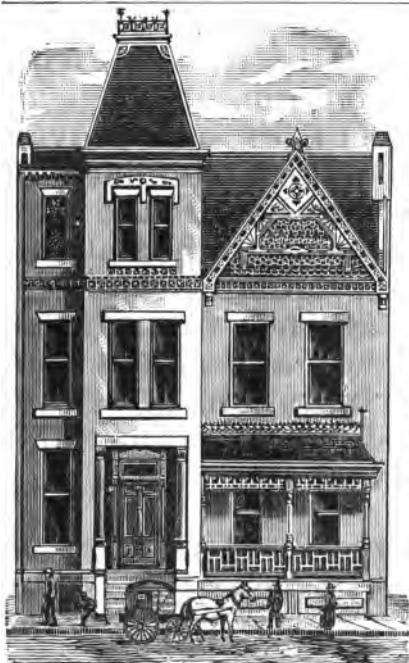
Dr. H. P. NELSON, Ashland, Ohio, says: "I have used it in a case of torpor of the liver, and am highly pleased with the results obtained."

Send for descriptive circular. Physicians who wish to test it will be furnished a bottle on application, without expense, except express charges.

RUMFORD CHEMICAL WORKS, Providence, R. I.

Beware of Substitutes and Imitations.

CAUTION.—Be sure the word "Horsford's" is *printed* on the label. All others are spurious. Never sold in bulk.



"BELAIR,"

—A—
Private Infirmary

—FOR—
DISEASES PECULIAR TO WOMEN

Belmont Avenue and Hayes Street,

Nashville, - Tenn.

Was opened for the reception of patients on January 1, 1890.

This institution is located in one of the most desirable residence portions of the City of Nashville and without any objectionable surroundings. The appointments are first-class, and nursing by trained and thoroughly qualified attendants.

Physicians wishing to send patients to such an institution, whether for medical or surgical treatment, will please address either

J. R. Buist, M. D.,

151 N. Spruce Street,

or Richard Douglas, M. D.,

206 N. Summer Street,

Nashville, Tenn.

Permanent Pepsin.

THE INSEPARABLE STANDARDS OF
VALUE ARE PERMANENCY
AND ACTIVITY.

WHEN a physician prescribes pepsin and his patient finds that it "sticks to the paper," that it forms a gummy mass "in powders," he may rely upon it that Fairchild's Pepsin has not been dispensed; if he has ordered Fairchild's, this behavior is positive evidence that he and his patient have been the victims of "substitution."

Pepsins which are hygroscopic, which do undergo upon exposure to air the changes characteristic of peptone, are offered (in the form of scales and in powder) with pretensions to permanent quality.

If a product is sought, of well-proven permanency and of highest standard of activity, Fairchild's Pepsin is the one which will never give cause for complaint.

Fairchild's was the original "Scale Pepsin;" the first positively "free from starch, sugar, acid, peptones or any added substance." The host of imitations of "Scale Pepsin" bear witness to the value and reputation of the original.

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H. HUN, Albany, N. Y.

J. P. PORCHER, Charleston, S. C.

A. JACOBI, New York.

J. STEWART, Montreal, Canada.

In a letter dated Berlin, Karlstrasse 19, March 2nd, Dr. Lassar, the Secretary General of the Tenth International Congress, directs me to inform the medical profession of America, that a programme of the Congress and other communications will be distributed two months before the meeting amongst those who will have registered previously and received their tickets of membership.

The latter can be obtained by sending applications and five dollars to Dr. Bartels, Leipzigerstrasse 75, Berlin, S. W. By so doing the members will save much crowding and time during the first days of the Congress.

For the American Committee of the Tenth International Medical Congress.
A. JACOBI, M. D.

PERSONAL NOTE.—Dr. John S. Park, of Franklin, Tenn., an alumnus of the Medical Department of the University of Pennsylvania, completed on April 3d his fiftieth year of active practice. His diploma is dated April 3d, 1840. Soon after his graduation he went to the eastern part of Texas, but in a year returned to Franklin, and since that date has practiced his profession with great success in this and the surrounding counties. Dr. Park's long years of practice and great success as an active physician have endeared him to all neighbors, among whom he is honored and esteemed as one of the foremost citizens.—*University Medical Magazine*.

VITAL STATISTICS.—In quite a number of our towns and cities, the word "*Unknown*" occurs far too frequently as a cause of death. When a Health officer, or Registrar cannot be fully informed as to the cause of death of a citizen, would it not be proper to have a coroner's investigation—What are our coroners for anyhow?

SANDER & SONS' Eucalypti Extract (Eucalytol).—Apply to Dr. Sander, Dillon, Iowa, for gratis supplied samples of Eucalyptol and reports on cures effected at the clinics of the Universities of Bonn and Griefswald.

TEXAS STATE MEDICAL ASSOCIATION.

Prof. J. S. Cain, M. D., of the Medical Department University of Tennessee, returned home Saturday evening April 26th ult. from a trip to Forth Worth, Tex., where he spent several days in attendance upon the Texas State Medical Association. He is full of praise of the physicians of Texas and their methods. He says that the address of the President of the association, Dr. R. M. Swearengen, of Austin, delivered to the public at the Opera House, was one of the most ornate and eloquent productions that he ever listened to, and that the numerous medical papers and discussions of the occasion were creditable to even that very learned body of medical men.

Dr. R. P. Burt, of Fort Worth, was elected President for the coming year, and that most efficient and excellent officer and gentleman, Dr. F. E. Daniel, of Austin, was re-elected Secretary for the next five years.

The Doctor stated, also, that notwithstanding the heavy rains of the past few weeks, the crop prospect of Northern Texas is most promising; that the country is on an ever-increasing boom, and that Tennesseans are always found well to the front in all laudable enterprises.

THE report of the New York Analyst of Drugs shows that the chances for getting drugs of good quality on prescription is 43.8 per cent.; fair, 17.4; inferior, 26.; not as called for, 11.6; excessive strength, 1.2—(*Times and Register*, Philadelphia, December 7, 1889.)

CHRONIC SYPHILITIC SALIVATION.—A. W. Furber, M. D., L. R. C. S., and L. D. S., says: I have for a long time had a gentleman patient under my care for disease of the teeth, and although my operations progressed favorably, I had many difficulties to contend with. The whole of my patients teeth appeared to have a syphilitic taint, and with increased flow of saliva, amounting to chronic salivation. These were not the only troubles I had to surmount; but that which retarded my work most was the repeated recurrence of syphilitic ulcers of the sulcus and gums generally, which, though not painful to my patient, was still a source of considerable discomfort and militated greatly against the success of my operations. Iodine having come under my notice, I was inclined to give it a trial, and with the addition

of a small proportion of liq. hydrag, bi-chlor., taken daily before meals for a time—also used occasionally as a mouth wash—the salivation became normal, the mucous membrane assumed a more healthy state and the teeth generally looked like coming back to their original color.

80 Fortress Road, London, N. W.

PEPSIN CORDIAL OF PARKE, DAVIS & Co.—This preparation has met with marked favor among the medical profession since its introduction, having proven a most convenient and efficient means for the administration of pepsin in liquid form. It possesses a high digestive power, being capable of dissolving fifteen times its weight of albumen; besides, is permanent and especially palatable, while for pharmaceutical elegance is all that can be desired. We venture the opinion that it is the only Liquid Pepsin aside from their Glycerole, that contains sufficient of the active ferment to justify or commend its employment as a substitute for the pure pepsin. This is offered as a scientific preparation, free from stigma of being protected by copy-right, and as an improvement upon liquid pepsins as a class. Its superiority as a digestive agent is a matter capable of therapeutic demonstration, which may be verified by actual administration.

STRICTURE:—According to the most ample and trustworthy evidence, *organic stricture of the urethra* is curable by a new method. So many physicians are coming to the front with testimony as to cures performed by this method, that even the most skeptical of physicians must feel like giving it a trial. The Century Chemical Co., St. Louis, Mo., furnish not only the formula and a vast amount of evidence as to cures, but are pleased to forward samples, that any physicians may have the opportunity of seeing what the remedy is capable of doing. It is now being used in some of the leading hospitals, and by physicians of the best repute.

MALTED MILK Co., of Racine, Wis., propound some very pertinent enquiries with satisfactory answers on our Title page. Malted milk, is a natural food always ready for instant use, does not contain starchy or other insoluble ingredients, and we know from practical experience that it is highly nutritious, easily digested and perfectly assimilated.

PEACOCK'S BROMIDES:—I can say in short, in twenty years of practice I have never found an equal to Peacock's Bromides for fits and disturbed nerve centers. It possesses a superiority over fits far beyond my expectations. I have recommended it for all it is worth in this locality.

H. J. FAIVRE M. D.

Hamilton, Ohio.

OUR readers will find on another page of this number a change in the advertisement of Tarrant & Co., as this month they call attention to their Effervescent Seltzer aperient. This old remedy, one of the most efficient salines known to the Profession, can be profitably employed at this season of the year for its alterative effect; it is not only a palatable and safe aperient, but is used with confidence in Lithemic, Gouty and other conditions where alkaline remedies are indicated.

SUCCUS ALTERANS.—Maysville, W. Va., Sept. 10, 1889. Eli Lilly & Co., Indianapolis. Ind.—I am fully satisfied your Succus Alterans has no equal as an alterative. I commenced using it on a patient on the 11th of June last. The lady was covered with sores from the top of her head to the soles of her feet, and three bottles have entirely cured her, she thinks, but I prevail on her to continue the medicine for at least six months longer.

Yours respectfully,

L. R. POOLE, M. D.

THE PHENIQUE CLINICAL CO., in addition to their invaluable preparation Campho-Phenique, also manufacture *Chloro-Phenique*, a chemical compound of Chlorine and Phenic Acid. It is an excellent antiseptic and anti-zymotic, for internal and external use, miscible with water in any proportion.

MESSRS. WM. R. WARNER & Co., received the only Centennial award indicative of superior merit for Sugar-Coated Pills. The judges in their report say:

"*The Sugar-Coated Pills* of Wm. R. Warner & Co., are soluble, reliable and unsurpassed in the perfection of Sugar-Coating, thorough composition and accurate sub-division."

THE NEW CITY HOSPITAL.

This handsome new building for the care of the indigent sick and injured of Nashville, has been completed and is now occupied by some of the inmates for whom it was designed.

The consulting staff has been selected, and Professors Duncan and Paul F. Eve, M. D., in the department of Surgery; Professors J. S. Cain and J. H. Blanks, M. D., in Medicine; Prof. W. D. Haggard, M. D., Gynecology and Pediatrics; and Prof. J. G. Sinclair, M. D., in Diseases of the Eye, Ear, Throat and Nose; will represent the Medical Department of the University of Tennessee, and medical students in Nashville will hereafter have unsurpassed advantages for clinical instruction.

The furniture, fittings and fixtures of the institution are all new and of the most approved design, the wards roomy and well ventilated and lighted, and with a good and efficient corps of nurses under an experienced matron from the Philadelphia Training School of Nurses, one may well challenge comparison with other like institutions.

SANDER & SONS' Eucalypti Extract (Eucalyptol).—Apply to Dr. Sander, Dillon, Iowa, for gratis supplied samples of Eucalyptol and reports on cures effected at the clinics of the Universities of Bonn and Greifswald.

NEUTROLACTICS.—Combined use of this most excellent galactagogue occasions our increased admiration of its valuable properties. It not only increases the quantity, but improves the quality of the nursing mother's milk.

DR. N. SENN and Dr. Chr. Fenger have recently been elected regular Professors of Surgery in the Chicago Polyclinic. In addition to clinical work, they will present a special course in abdominal surgery twice yearly.

DR. FARNIER has discovered that hands immersed in a solution of sulphate of copper, although they retained the sense of touch, became insensible to pricks of a needle, or cuts of an instrument.—*Times and Register*.

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THE BEST ANTISEPTIC.
FOR BOTH INTERNAL AND EXTERNAL USE.

LISTERINE.

FORMULA.—*Listerine is the essential antiseptic constituent of Thyme, Eucalyptus Baptisia, Gaultheria and Mentha Arvensis, in combination. Each fluid drachm also contains two grains of refined and purified Benzo-boracic Acid.*

DOSE.—*Internally: One teaspoonful three or more times a day (as indicated), either full strength or diluted, as necessary for varied conditions.*

LISTERINE is a well-proven antiseptic agent—an antizymotic—especially adapted to internal use, and to make all maintain surgical cleanliness—asepsis—in the treatment of all parts of the human body, whether by spray, irrigation, atomization, or simple local application, and therefore characterized by its particular adaptability to the field of

PREVENTIVE MEDICINE — INDIVIDUAL PROPHYLAXIS.

Physicians interested in LISTERINE will please send us their address, and receive by return mail our new and complete pamphlet of 40 quarto pages, embodying:

A TABULATED EXHIBIT of the action of Listerine upon inert laboratory compounds.

FULL AND EXHAUSTIVE REPORTS and clinical observations from all sources, confirming the utility of Listerine as a General Antiseptic for both internal and external use; and particularly

MICROSCOPIC OBSERVATIONS, showing the comparative value and availability of various antiseptics in the treatment of Diseases of the Oral Cavity, by W. D. MILLER, A.B., PH. D., D.D.S., Professor of Operative and Clinical Dentistry, University of Berlin, from whose deductions Listerine appears to be the most acceptable prophylactic for the care and preservation of the teeth.

Diseases of the Uric Acid Diathesis.

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LITHIATED HYDRANGEA.

Kidney Alterative—Anti-Lithic.

FORMULA.—Each fluid drachm of "Lithiated Hydrangea" represents thirty grains of FRESH HYDRANGEA and three grains of CHEMICALLY PURE Benzo-Salicylate of Lithia. Prepared by our improved process of osmosis, it is INVARIABLY of DEFINITE and UNIFORM therapeutic strength; hence can be depended upon in clinical practice.

DOSE.—One or two teaspoonfuls four times a day (preferably between meals).

Urinary Calculus, Gout, Rheumatism, Bright's Disease, Diabetes, Cystitis, Hematuria, Albuminuria, and Vesical Irritations Generally.

We have had prepared for the convenience of Physicians Dietetic Notes, suggesting the articles of food to be allowed or prohibited in several of these diseases.

These Dietetic Notes have been bound in the form of small perforated slips for Physicians to distribute to their patients. Mailed gratis upon request, together with our latest compilation of case reports and clinical observations bearing upon the treatment of this class of diseases.

LAMBERT PHARMACAL CO.,

314 North Main St., Saint Louis.

GOUT.

DIETETIC NOTE.—A mixed diet should be adopted, the nitrogenous and saccharine articles being used in limited amounts.

Allowed.—Cooked fruits without much sugar, tea and coffee in moderation. Alcoholic stimulants, if used at all, should be in the form of light wines, or spirits well diluted. The free ingestion of pure water is important.

Avoid.—Pastry; malt liquors and sweet wines are veritable poisons to these patients

WAYNE'S DIURETIC ELIXIR,

COMPOSED OF BUCHU, JUNIPER, ACETATE OF POTASH, ETC.

DIURETIC AND ALTERATIVE.

INDICATIONS.—Acute and Chronic Catarrh of the Bladder. Brick Dust and Chalky Deposits in the Urine, Gravel, etc. Acute and Chronic Bright's Disease, Lumbago, and in Acute and Chronic Rheumatism.

Prescribed and Endorsed by the Leading Physicians of the U. S. It is giving universal-satisfaction to the profession. It seems to be ALMOST A SPECIFIC for Diseases of the Genito-Urinary Organs.

EXTRACT FROM LETTER, W. F. GLENN, M.D.,

Professor of Genito-Urinary Diseases in the Medical Department of the University of Tenn.,

No practitioner passes many days, or seldom many hours, without being called upon to prescribe for some real or imaginary disease of the kidneys. While such serious disorders as diabetes and Bright's disease, in which these organs are fatally involved, are occasionally met with, they are few as compared with the many minor affections, not only in the kidneys themselves, but on all parts of the genito-urinary tract. Catarrh of the kidneys, ureter, bladder or urethra, irritations and congestions of the various parts of the urinary apparatus, are as common as bad colds. What is more frequent than patients complaining of pain in the back, in the region of the kidneys, with or without a scant flow of urine, or a burning sensation in the neck of the bladder or urethra on voiding urine, and numbers of other similar ailments. In all forms of functional derangements of these important excretory organs the administration of a gentle but effective diuretic generally affords relief. Where an analysis of urine proves the absence of elements that would indicate serious organic lesions it is a safe and in fact a proper course, to use a remedy that will stimulate to gentle action the cells of the kidneys, thereby increasing the watery portions of the urine. Such a course will rarely fail to affect a cure.

For this purpose there is nothing superior to buchu, juniper, acetate of potash, corn silk and digitalis. The action of many of this class of remedies, such as corn silk, juniper, eucalyptus, etc., have a more or less specific influence on bladder and urethral irritations and inflammations.

Some years since my attention was attracted to a remedy styled Wayne's Diuretic Elixir, which, upon examination, I found to be a combination of acetate of potash, juniper and buchu, prepared in such a manner as not to be unpleasant, but rather agreeable to the taste and accurate in its proportions. Being easier to prescribe and by far more pleasant to the patient than the same remedies freshly mixed in the drug store, I began to use it in all irritations of the kidneys, bladder, urethra and prostate gland, and have found it to meet every indication. Now, when I desire a mild diuretic effect continued for some time, I rarely depart from this mixture. Prof. Deering J. Roberts, Surgeon to the State Prison, has been using it largely of late at the hospital of that institution, and reports it perfectly satisfactory. Numbers of others of my medical brethren, to whom I have suggested its use, have reported it thoroughly satisfactory. Case after case taken from my own and from other record books, could be cited to show its satisfactory effects, but that is hardly necessary. And while I am not an advocate of the wholesale use of all the various preparations that are now crowded upon us, at the same time, after thoroughly testing this one for some years, I feel that it will not be amiss to present its virtues to the profession. Not for any new virtues that its ingredients may possess, for they have been understood for many years, but because of its careful preparation and pleasant taste, and thereby ready utility. From the very highly satisfactory results obtained by me for the past five years, I am quite sure its use will be attended with no disappointment or regret.

EXTRACT FROM LETTER, DR. THEO. JASPER, 322 SOUTH SIXTH ST., COLUMBUS OHIO:

COLUMBUS, O., January 21, 1886.—Wayne Elixir Company—Gentlemen: Regarding your most excellent preparation, "The Wayne's Diuretic and Alterative Elixir" I am happy to say that I have used it in my practice for over two years in hundreds of cases, and in every case I used it it gave perfect satisfaction. The effect of its action can be perceived immediately, and in most cases only a small quantity, five or six ounces, was needed to effect a complete cure; it is, besides, not unpleasant to the taste, and is borne by the most delicate stomach. Truly and most respectfully yours,

THEODORE JASPER, M.D., 322 South Sixth Street.

SPECIAL TO PHYSICIANS.—We will send, upon application, one bottle, containing .5oz., regular size, (retails at \$1.00) free for trial to those physicians who will pay expressage.

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(2B)

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Contains **THE ESSENTIAL ELEMENTS** to the Animal Organization—Potash and Lime;

The **OXYDIZING AGENTS**—Iron and Manganese;

The **TONICS**—Quinine and Strychnine;

And the **VITALIZING CONSTITUENT**—Phosphorus, Combined in the form of a Syrup, with *slight alkaline reaction*.

IT DIFFERS IN EFFECT FROM ALL OTHERS, being pleasant to taste, acceptable to the stomach, and harmless under prolonged use.

IT HAS SUSTAINED A HIGH REPUTATION in America and England for efficiency in the treatment of Pulmonary Tuberculosis, Chronic Bronchitis, and other affections of the respiratory organs, and is employed also in various nervous and debilitating diseases with success.

ITS CURATIVE PROPERTIES are largely attributable to Stimulant, Tonic and Nutritive qualities, whereby the various organic functions are recruited.

IN CASES where innervating constitutional treatment is applied, and tonic treatment is desirable, this preparation will be found to act with safety and satisfaction.

ITS ACTION IS PROMPT; stimulating the appetite and the digestion, it promotes assimilation, and enters directly into the circulation with the food products.

THE PRESCRIBED DOSE produces a feeling of buoyancy, removing depression or melancholy, and hence is of great value in the treatment of **MENTAL AND NERVOUS AFFECTIONS**.

From its exerting a double tonic effect and influencing a healthy flow of the secretions, its use is indicated in a wide range of diseases.

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In no other agent, nor in all other agents, perhaps, is there such universal reliance placed by the medical profession in the treatment of Scrofula, Phthisis and other forms of wasting disease as in Cod Liver Oil, and yet there is no other food or medicine so needlessly placed at a disadvantage in its administration as this remedy is when prescribed plain or in the form of an indifferent Emulsion.

Apart from its dietetic properties pure Norwegian Cod Liver Oil is an ALTERATIVE, A DISINFECTANT, A GERMICIDE, due to its richness in *Phosphorus Bromine and Iodine*, and a therapeutic agent of varied and extensive application, but its greatest utility depends on the form of its administration.

Almost any digestive organ can be trained to tolerate plain Cod Liver Oil to a great or less extent, but the physiology of digestion, as well as experience, shows the inability of the pancreatic fluid with other solvents of the Duodenum to Emulsify Oil to the condition of assimilation to an extent demanded in wasting diseases. Physicians recognized this fact years ago, and Chemists have since been endeavoring to solve the problem of a perfect Emulsion (*the digestion of Oil*), but not until within the last few years have we, who were first and always advanced in its manufacture, succeeded in making SCOTT'S EMULSION an absolutely perfect preparation.

In the manufacture of SCOTT'S EMULSION no chemical change whatever takes place in the Oil, but each globule is divided and subdivided into a state of minute subdivision, or until its consistency becomes that of its menstrum Glycerine and Mucilage, when its permanency is established for all time and under all conditions.

The formula for SCOTT'S EMULSION is 50 per cent. of the "finest" Norwegian Cod Liver Oil, 6 grains Hypophosphite of Lime and 3 grains Hypophosphite of Soda to the fluid ounce, Emulsified, or digested to the condition of assimilation with chemically pure Glycerine and Mucilage.

The permanency and efficiency of Scott's Emulsion is equaled only by its palatability. No child is so young or adult so morbidly sensitive as to find any objections to its use.

Physicians are requested to send for samples—delivered free—and compare its medicinal effects with any or all other agents upon the sick.

CHERRY-MALT PHOSPHITES

A Combination of the tonic principles of *Prunus Virginiana*, Malted Barley, Hypophosphites of Lime and Soda, and Fruit Juices. An elegant and efficient brain and nerve tonic.

BUCKTHORN CORDIAL (*Rhamus Frangula*.)

Prepared from carefully selected German Buckthorn Bark, Juglans Bark, and Aromatics. The undoubted remedy for Habitual Constipation.

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FEBRILINE

OR TASTELESS SYRUP OF AMORPHOUS QUININE. (LYON'S). FOR INFANTS AND CHILDREN.

Each Teaspoonful is equal to 2 Grains of Sulphate of Quinine.

Children take it and never know it is Medicine.

NEVER PRODUCES SICK STOMACH, and always produces the same result as the bitter quinine. In the manufacture of quinine there is left, after crystalizing the quinine, a dark colored substance known as Amorphous Quinine. We have by purifying the Amorphous Quinine obtained a pure alkaloid, the active principle of the Amorphous Quinine, which we have rendered tasteless, and which is equal to Sulphate of Quinine in every respect. It is tasteless, because it is insoluble in the mouth, but dissolves readily in the acids of the stomach. We use no Tannin; no Yuba Santa, which contains a large per cent. of Tannin.

Physicians can make Tasteless Tonics for Children and Ladies by combining with the Febriline Iron by Hydrogen, Carbonate of Iron, or Iodide of Potash.

Nashville, Tenn., Oct. 29, '85.

We have tried "Lyon's Tasteless Preparation of Quinine," and take pleasure in saying they are all that is claimed for them, and as palatable as sugar.

DUNCAN EVE, M. D.,
CHAS. C. THOMPSON, M. D.

Vernon, Ind., Jan. 25, '88.

Gentlemen:—I have tried Tasteless Quinine with splendid result. It can be taken by children readily, and will produce the same result as the Quinine Sulph. I shall continue to use it, especially among children, and can heartily recommend it to any one desiring a palatable and reliable preparation of this drug.

W. H. STEMM, M. D.

Hickory Valley, Ark., Jan. 27, '88.

Dear Sirs:—Received samples of your Tasteless Quinine Preparations. Found them satisfactory. Am using them in all cases of children requiring quinine.

E. F. BEVENS.

Aledo, Parker County, Tex., Jan. 25, '88.

Dear Sirs:—I have used the Tasteless Syrup of Quinine sent me, and am highly pleased with it. Children and Infants take it without any trouble, and it is as effective as the Sulphate of Quinine in controlling malaria.

O. MORSE, M. D.

Air Mount, Miss., Jan. 28, '88.

Paris Medicine Co., Paris, Tenn.

Gents:—Your preparation of Lyon's Tasteless Quinine was received. I was highly pleased with the use of it. It is the only preparation of Tasteless Quinine that I find entirely satisfactory. I deem it invaluable for infants and children, and it is as efficient in its action in every way as the Sulphate.

A. LOUIS JACKSON, M. D.

Uniontown, Md., Jan. 23, '88.

Paris Medicine Co.

I received your sample of T. S. of Quinine and find it an elegant preparation. I was able to produce the full effects of quinine and at the same time had no trouble to administer it to children who generally are averse to taking it in the usual form.

L. KEMP, M. D.

Big Gully, Blount Co., Tenn, Jan. 27, '88.

Dear Sirs:—I have formed a favorable opinion of the clinical value of your Tasteless Quinine Preparations, and find it a stable, elegant and permanent preparation, and one readily taken by patients, both old and young; and its price is not prohibitory.

T. W. ROBBINS, M. D.

Jeffersontown, Ky., Jan. 23, '88.

Sirs:—I used your Tasteless Quinine and find it all that is claimed for it. Children take it as readily as if it was simple syrup, and its effect is just as satisfactory as the quinine itself. I will use it always for children and sensitive stomachs of adults.

S. N. MARSHALL, M. D.

Columbus, Ark., Jan. 25, '88.

Have found it a perfect success, especially in administering to children. My druggist ordered a supply from Messrs. Meyer Bros. & Co., St. Louis.

R. M. WILSON, M.D.

Dennis, Ky., Jan. 25, '88.

Paris Medicine Co.

Gentlemen:—I have administered your Tasteless Syrup of Quinine, and with children it more than gives satisfaction. It is the sine qua non for children, and I shall take great pleasure in recommending it to the attention of our druggist and public generally.

J. R. MCCLELLAN, M. D.

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(5B)

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UTERINE TONIC AND RESTORATIVE.

Prepared from the Aletris Farinosa or True Unicorn and Aromatics.

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Amenorrhoea, Dysmenorrhoea, Leucorrhoea, Prolapsus Uteri, Sterility, to Prevent Miscarriage, Etc.

DOSE:—One Teaspoonful three or four times a day.

UNRIVALED AS A UTERINE TONIC IN IRREGULAR, PAINFUL, SUPPRESSED AND EXCESSIVE MENSTRUATION.

It Restores Normal Action to the Uterus, and Imparts Vigor to the Entire Uterine System.

Where women have miscarried during previous pregnancies, or in any case where miscarriage is feared, the ALETTRIS CORDIAL is indicated, and should be continuously administered during entire gestation.

CHAS. CLAY, M.R.C.S., Manor House, Dewsbury, England, says:—I find Aletris Cordial (Rio) is of great service in threatened miscarriage.

FRANCIS E. CANE, L.R.C.S., &c., Leeds, England, says:—I have tried the Aletris Cordial (Rio) in two cases of long standing dysmenorrhoea, with excellent results. One of these patients has spent a week in bed every month for two years. After all the usual remedies, I put her on Aletris Cordial, and for the last two periods she has been out and about all the time.

L. M. WATSON, M.D., Delhi, Ills., says:—I have used Aletris Cordial (Rio) in cases of dysmenorrhoea, suppressed menses and threatened miscarriage, and also, combined with Celerina, as a tonic after confinement, with the happiest results, and now I am using it on a case of leucorrhoea, with injections of S. H. Kennedy's Extract of Pinus Canadensis, and it is acting like a charm.

P. H. OWEN, M.D., Morganville, Ala., says:—I have prescribed Aletris Cordial (Rio) in several cases with the most satisfactory results, and regard it as the best uterine tonic I have met with in a professional experience of over twenty-five years. In cases of threatened miscarriage it acts like a charm. Would recommend its continuous administration in all cases when there is any indication of miscarriage.

Dr. W. BERTHELOT, Santander, Spain, says:—I have tried the Aletris Cordial (Rio), and it has seemed to me to be useful, especially in cases of dysmenorrhoea.

Dr. RASQUINET, Jupille, near Liege, Belgium, says:—I tried Aletris Cordial

(Rio) in the case of a woman who had had several miscarriages at the end of five months, and who is now again pregnant, having reached the seventh month: thanks to Aletris Cordial.

R. REECE, M. R. C. S., Walton-on-Thames, England, says:—Aletris Cordial (Rio) in painful menstruation is most valuable. A wife of a minister suffered much, and had had three miscarriages. I prescribed Aletris Cordial. She has for the first time, gone her full time, and was safely confined with a male child.

J. T. COLLIER, M. D., Brooks, Me., says:—I have used your Aletris Cordial (Rio) in cases of females at the menopause. Consider it one of the finest remedies for these cases.

Dr. GORDILLON, St. Amand, France, says: I have tried the Aletris Cordial (Rio) in a case of dysmenorrhoea. The result I obtained from the use of your preparation was excellent, better than I had obtained in the same patient by prescribing the usual remedies employed in such cases.

W. F. TOOMBS, M. D., Morrillton, Ark., says:—I have used a great deal of your Aletris Cordial (Rio) and I find it all you claim for it in amenorrhoea, dysmenorrhoea, metritis, leucorrhoea; I don't think it has an equal. I have used it in two cases of threatened miscarriage and the trouble was obviated. For a general Uterine Tonic I know of nothing superior.

R. D. PATTERSON, L. R. C. S. &c., Medical Officer, Caledon Dispensary, Co. Tyrone, Ireland, says:—I have very great pleasure in testifying to the very high opinion I hold of Aletris Cordial (Rio) in threatened miscarriage.

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SPECIALLY INDICATED IN DISEASES OF THE STOMACH, LIVER AND SPLEEN; IN DYSPESIA, ACCOMPANIED BY ACIDITY; IRRITATION OF THE STOMACH, HEARTBURN, SICK HEADACHE.

Particularly adapted for use in the

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In addition to its Aperient and Antacid Qualities it proves to be

AN ADMIRABLE VEHICLE

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When used as a vehicle, it is only necessary to add the medicine to be administered (preferably in solution) to half a goblet of water, stir in half a teaspoonful of Aperient, and drink during effervescence. Administered in this way, Physicians will find unpleasant remedies not only taken without nausea, but introduced into the stomach in a condition to be assimilated more readily.

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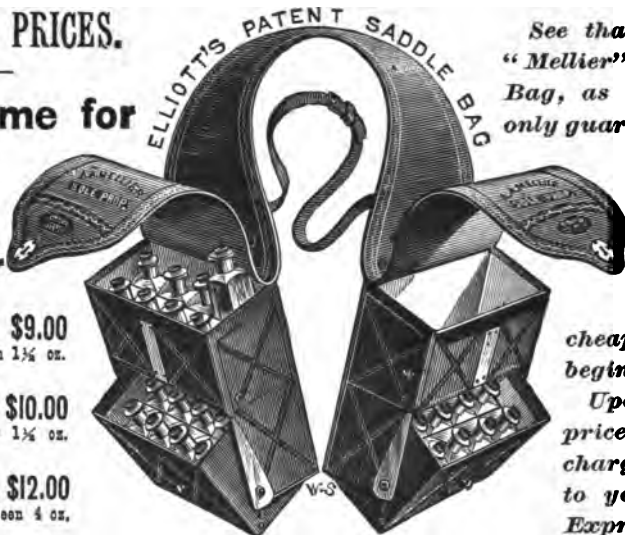
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Outside of large cities where there is temperance agitation, or where prohibitory law prevails, the doctor, patient and liberal society, prescribe this remedy in illness that should govern the use of this agent. Learned doctors know better than any other class of men the meaning of a pure stimulant and food combined, yet, for policy sake sometimes yield to be bound by the condition of local affairs and issues.

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Speaking in general terms, it is a fact, that society would like to drink a pure beer, under the advice of the family physician for the recovery and promotion of health, but many will not be identified with the general traffic.

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Each bottle will be labeled, "PURE BEER FOR INVALIDS, manufactured by the Windisch, Muhlhauser Brewing Co., Cincinnati, Ohio."

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